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MANUAL  
for  
FLORIDA  
STATE-WIDE PUBLIC HEALTH COMMITTEE  
and county affiliates

by  
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State Board of Health

and  
Executive Secretary, State-  
Wide Public Health Committee

Jacksonville  
FLORIDA, STATE BOARD OF HEALTH

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Published January 1940

State Board of Health

Jacksonville, Florida.



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The Florida State-Wide Public Health Committee is essentially a lay organization and should concern itself only with those broad questions of public health which may be participated in by lay persons. Matters of a specific or controversial nature should be worked out with the County Health Officer or, in the case of no full-time Health Unit, with the State Health Officer, Dr. A. B. McCreary, State Board of Health headquarters, Jacksonville, Florida.

## OBJECTIVES

### THE FLORIDA STATE-WIDE PUBLIC HEALTH COMMITTEE

1. To Disseminate accurate public health information to the people of Florida.
2. To assist in the organization and maintenance of full-time Health Units in all counties in the state.
3. To assist in securing the adoption of recommendations in "The Health Situation in Florida," as approved and adopted by the State Board of Health.
4. To cooperate with the State Board of Health and the Florida Medical Association and affiliates in their public health programs.

### COUNTY AFFILIATES

1. To secure a survey by the State Board of Health of the health needs and resources of the county, and to assist in carrying out the recommendations presented in the survey.
2. To secure the formation of a full-time Health Unit.
3. To actively assist the Health Unit in carrying out its program under the guidance and with the advice of the County Health Officer.
4. To cooperate with and assist the State-Wide Public Health Committee in its work of disseminating information concerning public health problems in the state and the correction of these problems as recommended in the American Public Health Association state-wide survey, "The Health Situation in Florida".

FOREWORD

At last the citizens of Florida are taking an interest in public health. It is a most encouraging sign.

Too long have they kept their distance, being concerned solely with affairs of government, business and education, forgetting that none of these can prosper without good health conditions.

Florida people are now awakening to the realization that health, business, progress and prosperity are inseparable. On all sides they come face to face with tangible proof of this statement. They see that the poorest people are the sickest people, that disease-ridden groups cannot pay their share of taxes much less purchase the commodities that support business. They have studied carefully the statistics which indicate very clearly a definite relationship between low per capita wealth and high rates of



preventable diseases and deaths.

All these facts, lifted out of the record books and placed squarely on the doorstep of the public, have given them something to think about. They know something must be done to correct poor health conditions if prosperity is to be established on a permanent basis. And so they are translating their thoughts into action.

The citizens' first contribution to improvement of public health conditions in Florida is the recently organized State-Wide Public Health Committee. Its membership, now more than 2,200, includes lay leaders in every county in the state.

It is to the State-Wide Public Health Committee, therefore, that the author dedicates this Manual in the hope that the ideas and suggestions contained herein will prove helpful in gaining a

clearer picture of public health and the part the public can and must take if they are to enjoy the full potentialities of public health.

January 1, 1940.

Jean Henderson





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Available upon application to State-Wide  
Committee headquarters, Jacksonville.

County Health Questionnaire  
Quarterly & annual report forms  
Telling the Community, bulletin on publi-  
city channels.



## ORIGIN OF THE COMMITTEE

The Florida State-Wide Public Health Committee is essentially a lay organization whose members include the state's leaders in civic, industrial and educational affairs. It does, however, have the endorsement and approval of the state health department\* and includes among its members many private physicians, dentists, lawyers and representatives of voluntary health agencies.

These people are deeply and sincerely concerned over the welfare of their state. They are convinced that the grave public health problems brought to their attention by the Committee must be overcome before permanent prosperity

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\* The terms state department of health and State Board of Health are used interchangeably in this Manual. One of the major recommendations of the American Public Health Association Florida survey is that of changing the name of the official state health agency from the State Board of Health to the State Department of Health.



can be assured.

After giving careful study to the public health problems and the means of solving them, Committee members are convinced the only permanent solution is the carrying out of recommendations set forth in the Florida health survey made by the American Public Health Association during the first six months of 1939. These recommendations, according to the unanimous opinion of experts who have studied the report, represent the most modern, scientific and economical method of administering public health.

Thus, the foundation upon which the Florida State-Wide Public Health Committee rests is the American Public Health Association survey. In its summarized form, the survey is some 75 pages in length. Ten thousand copies are being distributed by the Committee and the State Board of Health as a bulletin entitled "The Health Situation in Florida".

The complete report is three times the

length of the summary and contains many chapters on departmental health administration studies that are of interest only to staff members. It is this report that has been adopted by the State Board of Health as its long-time program.

Dr. A. B. McCreary, State Health Officer, says he well realizes the program is so ambitious "as to be almost heroic. Nevertheless," he has stated publicly, "the State Board of Health believes its adoption is to the best interests of Florida people. Every resource of the state health department will be utilized to put this program into action as quickly as it is humanly possible".

The U. S. Public Health Service and the U. S. Children's Bureau, who allocate large sums of Federal money to the state health department, echo their approval of Florida's decision to adopt the survey as its official program. Newspapers of the state have also been loud in their praise.

That the adoption of the program is no idle gesture on the part of the State Board of Health is borne out by the fact that two major recommendations have already been put into effect as this goes to press. The first was, of course, the establishment of the State-Wide Public Health Committee, which was a primary recommendation of the American Public Health Association field staff headed by Dr. Carl E. Buck and his associate, Dr. G. F. Anyot. The second was the discontinuance of the State Board of Health district service.

When the American Public Health Association field workers came to Florida to make their study they found the state divided into five official health districts by the state Board of Health. These districts encompassed the 50 counties that do not have full-time Health Units. Each district had an average population of 300,000 persons. To them a staff of one



Health Officer, one nurse and one sanitarian was supposed to administer full-time health service. That this was humanly impossible is easy to see.

The district health service was described in the American Public Health Association report as "expensive, inefficient and archaic." They recommend that the districts be abolished and the money thus saved devoted to strengthening existing full-time Health Units and establishing new ones. The U. S. Public Health Service and U. S. Children's Bureau heartily concurred and refused to permit further use of Federal funds for support of district service.

Therefore, on October 1, 1939, health districts in Florida were officially relegated to the history pages. (Editor's note: The reader should differentiate between this kind of health district, and the health districts being operated by some states where they serve such small populations and are so fully staffed

as to be comparable to County Health Units. Such districts are, indeed, Health Units operating over several counties instead of one because the counties are small in both area and population.)

Field workers of the American Public Health Association arrived in Florida on January 1, 1939 to begin their survey. They completed it June 30, the same year. The entire cost was borne by the Association from a grant given by the Commonwealth Fund for the specific purpose of making state studies.

Florida had considerable competition in its request for the survey. Bids from other states were being considered by the State Health Studies Committee of the American Public Health Association.

Florida's invitation was accepted because (1) it had the endorsement of the State Board of Health, the State Congress of Parents and Teach-

ers, The Florida Medical Association, the State Planning Board, the State Department of Education, and the Florida Public Health Association. (2) there was a definite need for the survey (3) Florida citizens gave evidence of sufficient interest and leadership to do something with the survey after it was made.

In February 1939 a handful of representative public-spirited citizens met to discuss the plans for organizing the State-Wide Public Health Committee. As the survey progressed this group became so interested in the findings and felt that they were of such paramount importance to the future welfare of the state that in May it was decided the Committee should lay plans toward permanent organization.

The original "handful of people" became known as the State Planning Committee of the State-Wide Public Health Committee. John P. Ingle, Sr., Jacksonville, was elected chairman.

Mrs. Malcolm McClellan, president of the Florida Congress of Parents and Teachers, was elected co-chairman.

The State-Wide Public Health Committee officially took permanent form on November 2, 1939. A constitution was adopted and permanent officers elected. Mr. Ingle became President and Mrs. McClellan, his co-chairman, was elected Vice-President.

At the time of his election, Mr. Ingle had been in retirement from business and civic affairs for two years. As President of the State-Wide Public Health Committee he re-entered the civic life of Florida to carve an even deeper niche than he had done during the long and active period of service prior to retirement. This statement is still more significant when it is remembered that the earlier niche had included such civic responsibilities as president of the Community Chest, twice president of the



Jacksonville Chamber of Commerce, president of the Rotary Club, president of the Jacksonville Motor Transit Company. Not long after accepting the Committee chairmanship Mr. Ingle was appointed general manager for the Associated Industries of Florida, Inc. By virtue of this appointment, public health and Florida industry became closely aligned.

### STATE ORGANIZATION PLAN

In formulating a practical plan of organization for the State-Wide Public Health Committee, three principles were kept in mind:

- (1) Necessity for representation from every section of the state.
- (2) Securing prominent and enthusiastic local leaders as Committee members.
- (3) Representation of every important group--civic, professional, lay, fraternal, religious, industrial

Since the primary function of the Committee is to give voice to the people, no officials of the state, county or city health departments are permitted to hold office in the Committee, or to vote. They are, however, considered ex-officio members and will attend meetings of the Committee whenever possible in order that members may have the benefit of their experience in public health.

The State Executive Board of the State-Wide Public Health Committee is composed of the following representatives who serve by virtue

of their office in other civic and professional organizations are:

American Legion, State Commander  
 Florida Bar Association, President  
 Florida Federation of Business & Professional Women's Clubs, President  
 State Chamber of Commerce, President  
 State Dental Society, President  
 State Dental Society, President-elect  
 Florida Federation of Labor, President  
 Florida Medical Association, President  
 Florida Medical Association, President-elect  
 State Nurses Association, President  
 Florida Congress of Parents & Teachers, President  
 Florida Federation of Women's Clubs, President  
 Florida Federation of Women's Clubs, First Vice-President

and eight members-at-large appointed by the State Health Officer.

Thus the charter members of the State-Wide Public Health Committee who serve by virtue of their offices in state organizations are:

W. C. Brooker	Tampa
D. H. Redfearn	Miami
Miss Verdie Selman	Jacksonville

Harold Colee*	Jacksonville
E. B. Penn, D.D.S.	Miami
I. W. Shields, D.D.S.	Miami
Charles E. Silva	Tampa
Leigh Robinson, M.D.	Ft. Lauderdale
John S. Turberville, M.D.	Century
Mrs. Martha Stetson	St. Petersburg
Mrs. Malcolm McClellan	Jacksonville
Mrs. J. Ralston Wells	Daytona Beach
Mrs. Thurston Roberts	Jacksonville

and the following appointees of the State Health

Officer:

John P. Ingle, Sr.	Jacksonville
Mrs. Willis M. Ball	Jacksonville
Luther W. Holloway, M.D.	Jacksonville
George C. Willings	Pensacola
Mrs. John G. Kellum	Tallahassee
Gilbert S. Osincup, M.D.	Orlando
Charles B. Mabry, M.D.	Jacksonville
Thomas E. Buckman, M.D.**	Jacksonville

District Chairmen serving as associate members of the State Executive Board are:

A. J. Cleary	Miami
Marion T. Gaines	Pensacola
O. W. King	Tampa
Edward M. Newald	Orlando
Clifford A. Payne	Jacksonville
F. A. Rhodes	Tallahassee
P. G. LeMoyne, (Acting)	Ft. Myers

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\*Succeeded by Carl D. Ererein, Tampa, Dec. 5, 1939

\*\*Dr. Buckman's term expired December 5, 1939.

S. R. Norris, M.D. Jacksonville, now serves on the Executive Board.



In order to stimulate local interest and thus establish local responsibility, the rules and regulations set down in the state constitution and the suggested constitution for county affiliates have been made as flexible as possible.

Experience has proved that organizations with humanitarian goals should be free to "carry on" to the best interest of the public whom they would serve. It is anticipated that at times, in order to fulfill this obligation, it may be necessary to move in ways that should not be shackled by iron-clad rules, nor cluttered with red tape.

Officers of the State-Wide Public Health Committee are elected annually and eligible for re-election. The Executive Secretary does not necessarily have to be a member of the Committee.

The State Executive Board, appointed by the President, carries on the work of the Com-

mittee between annual meetings. It meets at the discretion of the President, but can be called into session upon written notice from one-fifth of the membership of the Executive Board.

It is the duty of the Executive Board to organize affiliate and local committees in each of Florida's 67 counties. It is also their duty to decide matters of policy for the State-Wide Committee as a whole and, upon invitation, for county committees that may desire such service.

State Districts - Seven District Chairmen and Co-chairmen are appointed by the Executive Board to preside over the seven districts into which the state has been divided to facilitate Committee operation. These men and women are associate members of the State Executive Board.

It is the duty of the District Chairmen to assist in the organization of county committees within their district, and to see that these committees remain active, to hold district

meetings or conferences as frequently as deemed necessary and to serve as a clearing house for the state organization.

In appointing District Chairmen and Co-chairmen, the precedent has been established of choosing a man for one position and a woman for the other. In counties, the same idea can be carried out to advantage. It is thought that this policy will engender a more diversified interest in the Committee's program.

As a matter of policy it is not desirable that one person be allowed to hold more than one office. For example, a District Chairman or Co-chairman should not also serve as an officer on the Committee in his home county. He might, however, very profitably serve as a member of the County Executive Board.

This same policy applies to members of the State Executive Board. They should not serve as District Chairmen, or officers of a county

affiliate. But they may prove very valuable as members of the County Executive Board.



## OBJECTIVES OF COUNTY AFFILIATES

In counties that do not have full-time Health Units, the first and most important object of the County Public Health Committee should be the establishment of such a Unit\* for the **protection** of the health of all who live in the county.

In order to more fully appreciate the magnitude of the county's health problems and the size Unit necessary to cope with these problems, a detailed survey of actual conditions in the county should be made.

Usually, surveys cost money and frequently are very difficult to obtain. But such is not the case with County Health Surveys. These are obtainable upon request to the State Board of Health. But so

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\* It is the responsibility of the Committee to acquaint the County Medical Society with the fact that as a matter of policy the State Board of Health and the U. S. Public Health Service recommend to the staff of full-time Health Units only those persons having the approval of the County Medical Society.

numerous are the demands, and so limited the personnel of the state health department that it is necessary to handle them in the chronological order in which applications are received.

Applications for county surveys should be drawn up as formal resolutions or official letters of invitation. These should come from the County Public Health Committee as well as from the County Medical Society and the Chamber of Commerce, or any other group sufficiently concerned with the welfare of the county to participate in such a request. Among the possibilities are County Council of Parent-Teachers Associations, County Federation of Women's Clubs, American Legion, County Tuberculosis Association, etc.

In presenting invitations to the State Board of Health requesting county surveys, it should be remembered that the mere passing of resolutions is not sufficient. Copies must be sent to the headquarters of the State Board of Health in Jacksonville before work on the survey can begin. The resolutions should

be addressed to the attention of the State Health Officer, Dr. A. B. McCreary.

When the survey is completed and local health problems set forth in a mimeographed bulletin, the County Public Health Committee and other sponsors will have a concrete foundation upon which to base their claim for the necessity of a full time Health Unit. It is the type of factual document with which the Committee can face the County Commissioners.

After the Unit is established the County Public Health Committee still has work to do. Its members should then assist the Unit with its program and keep the citizens of the county informed as to progress being made.

In standing behind the Health Unit, the Committee makes a definite contribution toward the maintenance of the highest standards of public health service obtainable for the amount of money expended.

### WHAT A COUNTY SURVEY TELLS

In surveying the health conditions in a county the State Board of Health enumerates and analyzes in detail the health problems of the entire county, making recommendations for their solution. The result might be likened to surveys made by civil engineers prior to starting work on a piece of major construction.

As with the civil engineer, so with the health officer. Each must know where he is going and what obstacles have to be overcome to reach that goal. The survey maps out the route for the County Health Officer.

That is why a survey is a prerequisite for the establishment of a Health Unit. Even after the Health Unit is organized the survey is valuable to the health officer, for he uses it to plan his initial disease prevention and health promotion.

The survey is also used to determine the minimum staff and budget required to satisfactorily



set up a full-time Health Unit that can be enlarged and augmented as more funds are available.

The type of information contained in the survey is:

Population trends over a period of years, according to race, sex, age groups.

Analysis of climate and soil in relation to health conditions.

Commercial and economic background.

Analysis of birth and death statistics over a period of years by race.

Investigation of disease which should be reported to public health authorities but in all probability are not being reported, since the county has no full-time Health Unit.

Report on any existing facilities for maternal and infant hygiene instruction through privately operated clinics, county nursing service, etc.

Enrollment in schools by grades, race. Extensive sanitary survey of all school plants, with a report of condition of water supply, lavatories, sewage disposal, ventilation, lighting, heating, etc.

List of physicians and doctors practicing in county and analysis of geographic distribution. Number of midwives practicing in county. Analysis of hospital facilities.

Survey of tourist camps in regard to sanitation. Survey of mosquito problem to determine whether it is confined to pest mosquitoes or whether malaria or other disease carrying mosquitoes are present.

Recommendations for coping with the above problems.

Budget setting forth appropriation necessary to establish a minimum full-time Health Unit, stating the amount which must be raised locally and the amount that will be supplemented by the State Board of Health, U. S. Public Health Service, and U. S. Children's Bureau.

### WHAT IS A HEALTH UNIT?

A full-time Health Unit seems to be a very vague and bewildering object in the minds of most people. Apparently they don't quite know what it is, why it is, or what it does!

Just as the state health department is the official health agency of the state, so the full-time Health Unit is the official health agency of the county.

In Florida, County Health Units are created by what is known as a permissive law. Not in the law, but established as a matter of policy by the State Board of Health is the requirement that personnel of the Health Unit have the approval of the County Medical Society.

The County Health Unit belongs to the County and responsibility for its operation rests solely with the county. The extent of State and Federal operation in counties is confined to (1) Partial financial maintenance (2) Consultation ser-

vice from State and Federal public health specialists (3) Distribution of free biologics to local health officers and private physicians (4) Use of State Board of Health laboratories at Miami, Pensacola, Tampa, Tallahassee and Jacksonville.

The state health department does not render the direct service of health officers, sanitarians and nurses in any community or county other than on occasions of emergency or highly technical questions. - It is no more reasonable to expect the state health department to run county and city health departments than it is to expect the U. S. Public Health Service to establish offices in the state for the purpose of operating the state health department. This practice, if it were attempted, would not be tolerated by democratic people.

Supervisory bureaus and divisions operated by the State Board of Health for the purpose of assisting full-time Health Units with their pro-

health, engineering including environmental sanitation, health education, vital statistics and local health service.

Specifically, the services to be expected from the modern, fully-staffed, adequately financed County Health Unit are:

The investigation of communicable diseases such as syphilis, gonorrhea, malaria, infantile paralysis, meningitis, typhus fever, undulant fever, tuberculosis, hookworm, diphtheria, typhoid, with specific regard to instituting measures for the control of these diseases.

Detailed and periodic investigation and supervision of general sanitary conditions, particularly as related to water supply and sewage disposal.

Supervision of the public health aspects of the production, pasteurization and distribution of milk.

Inspection of industrial plants to eliminate health hazards.



Examination and inspection of school children for the discovery of communicable diseases or physical defects. Notification to parents of the findings of these examinations and referral to private physicians for diagnosis and treatment, or in the case of indigents, to any available clinic or institution.

Operation of a dental program that includes courses in balanced diets as aids in building healthy teeth; pre-school dental clinics with dental health education instruction for the mothers. Effort should also be made to establish clinics for the correction of defects of dental indigents among children. Where there is some means of caring for dental indigents so that corrections are assured, dental inspection by the local dentists is desirable.

Nutrition should be an integral part of every county health program.

Health conferences designed to improve infant and pre-school care for essentially well children. Also conferences, such as pre-natal care for those who would not otherwise obtain medical supervision.

Clinics for diagnosis of syphilis and gonorrhea. Treatment for those patients unable to pay.

Protection against certain communicable diseases known to be preventable. These include smallpox, diphtheria and typhoid.

Clinics for the early diagnosis of tuberculosis and follow-up service on active cases, including the examination of all members of the family in which there is or has been an active case. Public health nursing service in the home to include teaching both patient and family in the care and prevention of the spread of tuberculosis. Assistance in obtaining institutional care, and service to rehabilitate the person who has returned

from the institution.

Public health nursing, which includes innumerable services, such as assisting at conferences, school services, health education and home visits where instruction is **given** in carrying out the physician's orders or the regulations of the health department.

Recording and analysis of births, deaths and disease reports. These are essential for building future programs and evaluating the effectiveness of past programs.

A continuous program of health education, which means the dissemination of information on healthful living and disease prevention to everyone in the community, adults as well as children. Working through newspapers, radio, clubs, schools, movies, the Health Officer, public health nurse, sanitarians and health educators to communicate to the citizens the means of controlling, and in many

cases completely eliminating certain health problems.

Distribution of free biologics from the State Board of Health to private physicians. These include smallpox and typhoid vaccine, diphtheria toxoid, tuberculin, diphtheria anti-toxin, tetrachloroethylene for treating hookworm, insulin for indigent diabetics, silver nitrate to prevent blindness in newborn babies, and anti-rabic treatment for indigents.

Child guidance clinics should be a part of every Health Unit activity. Although there are no mental hygiene programs being carried on at present by Florida Health Units, the State Board of Health hopes some will be established in the near future.

To be successful a County Health Unit must:

1. Be full-time, meaning that its employees must work only for the Health Unit and should not engage in private practice.

2. The staff must be well trained as public health specialists. A good practitioner of private medicine does not automatically make a good practitioner of public health any more than a good practitioner of public health would, by virtue of being exceptional in that field, prove exceptional as a private practitioner.



COLORED AUXILIARY

As soon as the State-Wide Public Health Committee and its county affiliates become fairly well established they should direct their attention toward the organization of a Colored Auxiliary. Since one-third of the population of Florida is composed of Negroes it is important that attention also be focussed on them in the state-wide movement to improve health conditions.

The Colored Auxiliary of the State-Wide Public Health Committee can best be promoted through colored ministers and school principals. It must be borne in mind that no one denomination should be given preference over another, but rather an attempt should be made to enlist one representative from each denomination simultaneously. In the order of size of membership, the leading denominations are Baptist, African Methodist, Episcopal, Catholic. The latter two have very

small congregations.

The state office of the State-Wide Public Health Committee is already taking steps to enlist colored leaders in various counties. As these are recruited their names are being forwarded to the chairmen of the County Public Health Committee. For this reason it would be well for any County Committee planning a Colored Auxiliary to get in touch with the state office of the State-Wide Public Health Committee before taking definite steps.

Once the interest of the colored leaders is secured, it is almost certain that enthusiastic programs will be carried on. They are eager for information and take pride in having the opportunity to help their people.

Too often are colored people the victims of unscrupulous persons, many times of their own race. They need the assistance of honest, conscientious people, both white and colored, who are in position to guide them.

Syphilis, maternal and infant deaths and tuberculosis take the greatest toll among colored people. The cost is a heavy one, because, by and large, colored people either do not know what to do, are not financially able to do it, or if financially able, are prone to fall prey to quacks, untrained midwives or patent medicine vendors.

If white people are not interested in promoting better health among Negroes from a humanitarian standpoint then they should be interested from a standpoint of self-protection. Negroes perform most of the domestic duties in Florida. They go into homes to cook food, wash clothes, tend children, wait on tables, bringing with them the germ of whatever communicable disease they may have. Outside the home they serve as chefs, waiters and waitresses, maids, elevator operators, chauffeurs, who in every instance are capable of transmitting dangerous and infectious disease germs.

Too often is the remark heard, "If it weren't

for our large Negro population the Florida disease and mortality rate wouldn't be so high." Those who make this statement do not stop to think that other states also have their underprivileged groups which, in all probability are as much or more of a problem than Florida's.

Disease and death do not recognize race or social class. Therefore, public health cannot recognize them. The health of the people is a common problem that must be met by all for all.

## ORGANIZING THE COUNTY COMMITTEE

The first consideration in organizing County Public Health Committee should be that of membership and selection of officers. Invitations for membership should be extended to those leaders in the county whose identification with and interest in the Committee will create a favorable impression upon the public. Many times such persons are already established as civic leaders but just as frequently the Committee will be the means of discovering and developing new leaders. This, of course, is a healthy condition for any organization to promote because new blood acts as a stimulant.

County Committees should consist of a minimum membership of 25, divided as equally as possible among men and women. No limitation is placed on membership, which varies according to population. Counties with large populations may have as many as 200 or 300 members.



The largest community in the county is usually Committee headquarters. This means that the county seat may not always be Committee headquarters.

As in the State Committee, so with the County, the organization must be planned on a basis of (1) geographic representation (2) civic representation. No area or group in the county should be omitted.

Geographically - The county may be divided into arbitrary districts, making as many districts as deemed necessary except in counties where there are Health Units. In these counties, the districts laid out by the Health Unit are accepted by the Committee.

In Hillsborough and Duval Counties, where the County Health Unit does not operate within the corporate city limits of Tampa and Jacksonville, the County Public Health Committee should add a city district or districts to its Committee. Members of county district committees located in cities where there are

full-time City Health Departments must remember to utilize these official departments as they do the County Unit.

It is helpful to black off the district boundaries on a large county map or blueprint. These can usually be procured from the county engineer's office.

In planning districts for counties without Health Units, it is better to use the various communities as a nucleus for each district. Thus, the Committee's pre-unit districts should be approximately the same as those which will be set up by the Unit.

Each county district should have its own committee headed by a chairman and co-chairman who reside in the district. The county district is represented on the County Executive Board by the county district chairman. These county district committees are the foundation upon which the structure of the County Public Health Committee rests. Their strength or weakness

determines the strength or weakness of the entire county organization.

The county district committee can easily adapt the organization plan of the County Public Health Committee to its own use. The district organization should be a replica in miniature of the county organization.

Civic Representation - The County Public Health Committee must be especially careful to secure representation from every civic organization. Among those found in the majority of counties and which it is especially important to include, are American Legion and American Legion Auxiliary, Parent-Teachers groups and councils, Rotary, Lions, Kiwanis, Civitan, Optimist, Exchange, Junior Chamber of Commerce, Senior Chamber of Commerce, County Federation of Women's Clubs and the more active local woman's clubs, Business and Professional Women's Clubs, Pilot Club, and such voluntary health organizations as Tuberculosis, Cancer, Heart, Crippled Children and Social Hygiene.

The council of Social Agencies and organized labor should also be represented. There should also be representation from various professional groups such as the County Medical Society, Dental Society, etc. A more complete list is to be found in the Suggested County Constitution in the Appendix.

Official Representation - The following local tax-supported agencies should be represented on the County Public Health Committee: County Commissioners, district welfare board, the county budget commission, school board, school superintendent.

As stated in an earlier chapter, the County Health Officer, public health nurses, sanitary engineers and other Health Unit staff members are ex-officio members. They do not hold office or vote.

Fraternal and Religious - No denomination should be overlooked. The Committee is a democra-

tic organization and some of the most important work is done by pastors. They are the key persons and carry the message behind the scenes to those members of their congregation whom they feel best qualified to assist in the health movement. Ladies' Auxiliaries of such bodies should also be remembered.

Method of Inviting Representatives - In seeking representation from any organization, the proper procedure and the one that brings best results is that of asking the president of the organization whose representation is sought, to appoint a representative. It should be suggested that if he himself is too busy to serve, he appoint a member interested in health work.

Choice of representation for the organization should be left with the president. If however, the County Public Health Committee Chairman knows of someone whom it is thought would make an interested member of the Committee, there is no reason why the individual's name cannot be suggested.



Health Councils - Those counties that have had active County Health Councils or local community councils are affiliating with the State-Wide Public Health Committee. This is in accordance with an agreement between the Bureau of Public Health Nursing, State Board of Health, which organized these councils three years ago as adjuncts to the public health nursing service.

The merger in no way curtails the activities of the former councils. On the contrary, it increases their scope, for they continue to carry on nursing committee programs as a vital and necessary function of the general program of the Committee.

In a majority of counties where there are Health Units, the merger has already been completed. These are Pinellas, Hillsborough, (whose Unit Auxiliary brought more than 250 members to the State-Wide Public Health Committee) Escambia,

(whose Committee merged with the Council and added some 120 new members to the State-Wide Committee roster) Taylor, Jackson, Broward, Monroe, Orange, Lake, Highlands, Gadsden. They are taking the name of the Committee and in most cases the Committee's chairman. At this writing (January 1, 1940) only Leon-Wakulla, Gulf-Franklin, Bay and Duval Counties have both a Council and a Committee.

EXECUTIVE COMMITTEE

No matter how small the membership of the County Public Health Committee, an Executive Board is needed to supervise the organization's affairs. The Board acts as a clearing house for all activities of the organization including those of the County District Committees and sub-committees.

It is the duty of the Executive Board to plan a general program for the County Committee on an annual basis and turn it over for administration to the various sub-committees concerned. The Executive Board, however, is responsible to the general membership and should therefore maintain continuous supervision of all projects, requiring periodic reports from sub-committees.

It should not be possible for any sub-committee to start a project or release publicity without first securing official approval from the Executive Board. In counties with Health Units, the Executive Board of the Committee should not approve any project without

first having discussed all phases of it with the Health Unit director. Where there are full-time City Health Departments, such as Tampa, Miami, Jacksonville, the same holds true if the projects affect the city.

Publicity Supervision - The Board should draw up rules governing release of publicity in order to guide the Public Relations chairman and protect the organization itself. The Suggested Constitution for County Committees provides that publicity releases such as health columns or any stories or broadcasts relating to health shall be approved by either the County Health Officer, the State Board of Health, County Medical Society or the Florida Medical Association. This is considered a reasonable safeguard against inaccuracy and should do much to promote the confidence of the general public in the reliability of information emanating from the Committee.

Membership of County Executive Board - The mem-

bership of the Board should be kept as small as possible and still provide full representation of the whole Committee.

There should be a minimum of 5 members and a maximum of 15. They should include the officers of the County Committee, the chairman of each county district committee, chairman of standing sub-committees of the County Committee, and perhaps 2 or 3 members-at-large.

Meetings - Since the County Executive Board is responsible for the success of the County Committee, and since the Committee usually meets only once or twice a year, it is important that the Executive Board hold frequent meetings. They should be held at least every two months, and even more often if necessary. For this reason, in drawing up the Committee's constitution, care should be taken not to limit the Executive Board meetings to specific dates.



## MEETINGS

The degree of interest stimulated by fast moving, informative meetings will determine the degree of success the County Public Health Committee enjoys.

It is possible for anyone to conduct interesting meetings if he really wants to. All that is necessary is a little preparatory planning and a firm determination to start promptly and keep the meeting lively after it gets under way.

If there is any secret to successful meetings and successful leadership, it is probably that of giving credit where credit is due, and bestowing recognition in public so that the person commended knows he is genuinely appreciated. Nothing makes people work harder than pats on the back.

It is important that an agenda be written for every meeting. There should be three copies, one for the secretary, one for the chairman-of-the-day, and one for the Committee Chairman or presiding officer.

The chairman-of-the-day should be made con-

scious of the fact that accurate timing of the program is essential. Care must be taken that he or she receives full credit for work done, both in the meeting and in the publicity appearing in newspapers in connection with the meeting.

Kind of Meeting - Meetings need not be of the same type throughout the year, some can be luncheons, others dinners. In fact, it might lend variety to adopt an interchangeable policy. Local conditions, however, determine the advisability or inadvisability of instituting this policy. All meetings should be well publicized in advance, not only to newspapers, but also by written notices to each member. These notices should be sent out well enough in advance of the meeting to enable members to make a place for it on their calender. If the Committee holds monthly meetings, a week's notice should be sufficient. If it meets only every two or three months, then two weeks notice is advisable. And if still less frequent meetings are held, then the first notice should

go out a month in advance to be followed the week before the meeting with another brief notice. If possible, these should be followed by telephone call reminders the day of the meeting.

We live in a busy world. Public-spirited people who serve and work on committees are in great demand and therefore, extremely busy. It is no reflection on the County Public Health Committee and no indication of lack of interest if members need to be reminded several times about a meeting in order to prevent their unwittingly forgetting it.

Therefore, unless some member asks that he or she not receive a telephone reminder, it is the courteous and wise thing to do. Usually, the membership list is so large that it is too much of a burden for one person to handle alone. In such cases a telephone committee can be appointed to divide the responsibility of calling.

Frequency of Meetings - The frequency of general

meetings of the County Public Health Committee varies greatly in different counties. It depends solely upon the wishes of the members.

Large Committees usually meet in general session only once or twice a year, the business of the organization being carried on during the interim by the County Executive Board. Smaller Committees may hold general meetings either quarterly, every two months or even every month, as directed by members.

First Meeting - The first meeting is, of course, the organization meeting and extremely important. Special care should be taken in the choice of time and date in order to assure the very largest possible attendance.

The list of those to be invited should be thoroughly assembled and as complete as it is possible for the small group planning the meeting to make it. The procedure for the organization meeting should be planned as carefully as the list of persons invited to attend. It is customary to

permit 10 or 15 minutes leeway at the first meeting between the time stated on the notice and the time it is actually called to order.

The constitution and by-laws will be presented for consideration and study. A sufficient quantity should be on hand at the first meeting to permit thorough reading by all present. The form of the Suggested Constitution is given in the Appendix of this Manual. Copies for distribution may be obtained from state headquarters.

At some point during the meeting it should be made plain that the membership is not limited to those present. They form a nucleus around which the organization is to be built, and are, therefore, privileged to suggest other candidates for membership.

The temporary chairman for the meeting is arranged in several ways. A volunteer previously decided upon - usually the state-appointed County Chairman - may call the meeting to order and take the chair. Or, someone in the audience may be



"primed" to nominate a certain person as Chairman immediately after the meeting is called to order.

Still a third alternative is offered if a representative of the state office happens to be present. In this event, the representative could open the meeting, state the purpose of the Committee to be organized, then at the conclusion of the remarks call for a motion to organize, followed by consideration of constitution and by-laws.

The main requirement for holding a successful organization meeting is careful planning of details in advance. Nothing should be left to chance, for the difference between a strong and a weak organization is often determined by the strength or weakness of the first meeting. A haphazard first meeting may result in the election of the wrong people as officers, and the Committee's death before it is born. A suggested order of business for a first meeting would be as follows:

Call to order  
Selection of meeting chairman  
Selection of secretary  
Purpose of meeting  
Resolution to organize  
Committee to draft constitution  
and by-laws  
Roll call, securing full name,  
exact mailing address  
and telephone number  
of all present  
Announcement of next meeting  
at which election of  
officers will take place.

Or, if it is felt that it will not be easy to hold a second meeting with as large an attendance as secured at the first meeting, the constitution may be adopted and officers elected at the first meeting.

In the event consolidation of first and second meetings is deemed advisable, the person planning the organization meeting should have an unofficial committee of three meet to draft a tentative constitution, which will be as nearly in its final form as it is possible to make it. Someone familiar with such documents and with the purpose of a County Public Health Committee should head this group.

Then at the general meeting, the three persons can be officially appointed as the constitution committee and thus be prepared to present the document to the assembly for immediate consideration.

Order of Business, Regular Meetings - The order of business for regular meetings can be varied greatly, giving precedence to important items.

The County Public Health Committee should adopt an order of business best suited to its needs.

Necessity for reading of the minutes may be eliminated by having them mimeographed and mailed to all members immediately following each meeting. When this is done the Chairman should state, at the subsequent meeting, that the minutes were mailed to each member and ask if there is any discussion or any corrections before officially incorporating them in the organization's records.

The model order of business which follows is subject to change to meet local needs:

1. Roll call
2. Reading of minutes
3. Reports of Executive Board and Standing Committees
4. Reports of special Committees  
(this includes reports of progress made or any action taken at previous meeting)
5. Report of County Health Unit Director and Supervising Nurse
6. Announcements (including health and medical events of current interest in the county, state and nation)
7. Unfinished business
8. New business
9. Special program

Annual Meeting - In addition to the rou-

time business and election of officers that always transpired at annual meetings, this would also be a good time to feature an "Off the Chest" ballot. By this is meant that all present be permitted to express their opinion and offer suggestions as to what might profitably be included in the Committee's program for the coming year.

Ideas thus advanced could be presented on

signed ballots. The ballots could be serially numbered with the author's name on the stub and his idea or suggestion on the other portion of the ballot. Stubs containing the name should be put in one box and the part of the ballot containing the idea in a separate box.

The special sub-committee appointed to analyze the ideas should carefully consider each suggestion. Any commendable ideas should be presented to the County Executive Board (the author's name still unrevealed). In the event the Executive Board decides to incorporate any of the suggested ideas in the Committee's program, full recognition should be given the author of the idea. He might receive a Special Achievement Award at suitable ceremonies. No member of the health department staff should be eligible to receive the award.

Preliminary Procedure - The State-Wide Public Health Committee recommends that Robert's Rules of



Order Revised be used as the authority for all decisions. If this recommendation is accepted by the County Public Health Committee it should be incorporated in the constitution or by-laws.

A copy of "Robert's Rules" should be in the possession of every Chairman for ready reference. It is most helpful in planning details of procedure for meetings and for general use in directing the activities of the Committee.

## TOPICS FOR MEETINGS

No Chairman should ever be at a loss for interesting subject material for study, discussion or talks at Committee meetings. There is probably a much larger number of subjects than there are meetings.

In fact, in order to utilize even a fraction of the available material the Committee undoubtedly will have to divert some of the subjects to guest appearances before other organizations. For this reason, the chairman of the Public Relations committee is advised to devote some time to this chapter.

After choosing the subject for the meeting, the next step is choice of a speaker. For County Public Health Committee meetings the speaker usually should be someone outside the Committee. Although, by virtue of its size, diversity and professional representation, the Committee membership might offer an excellent supply

of speakers who could and should be put to work. In this way the Committee meetings would serve as a testing ground for the Speakers Division of the Public Relations committee.

When a Committee member is the guest speaker at the Committee meeting, the County Chairman and chairman of the Public Relations committee should make a special point of listening to the talk with the idea of booking the speaker for appearances before other organizations. The notes that follow, scratching only the surface of a vast supply of subjects, are intended more to pique the imagination than to pose as a source of material:

1. Highlights of the American Public Health Association survey of Florida health conditions.
2. The County-wide Public Health Committee
  - (a) Organization
  - (b) Scope
  - (c) Value
  - (d) Purpose
  - (e) Functions
3. The importance of having a county survey of health conditions made by State Board of Health.

4. What is Public Health?
5. The Value of a County Health Unit to our County.
6. How can local voluntary health agencies be brought into the general health program of the county?
7. Why health department personnel needs special training in Public Health.
8. Highlights of Florida's new school health program.
9. How to place publicity.
10. Demonstrations by the public health nurse of communicable disease technique in the home and many other phases of nursing service.
11. Current trends in public health.
12. The State Board of Health, its organization and functions.
13. The relationship of the State Board of Health to the local Health Units.
14. The importance of early case finding and hospitalization of cases of tuberculosis. (This should be given by the County Health Officer or someone from the State Sanatorium, or the Division of Tuberculosis, State Board of Health.)
15. The State Hospital (Chattahoochee) by someone who is a member of the staff.

16. The Crippled Children's program by someone connected with the organization.
17. The contribution of the Industrial Home for Boys to the State of Florida.
18. The contribution of the Girl's School of Ocala.
19. The contribution of the Home for the Feeble Minded, by someone employed by the institution.
20. The contribution of the Deaf and Blind Home, St. Augustine, by member of the staff.
21. How the Red Cross can assist in the health program of a county.
22. How service clubs can assist in the county health program.
23. The achievements by other sections of the country in public health work.
24. Program of the 4-H Club, given by the Home Demonstration Agent.
25. Plans for National Negro Health Week, month of April. Secure a good Negro speaker from Tuskegee Institute, or from the A. and M. College, Tallahassee.
26. Plans for annual May Day Child Health program.
27. Maternal Mortality in Florida (Mother's Day).



28. The state-wide and local midwife problem. This should be given by a member of the Public Health Nursing Bureau of the State Board of Health or a County Health Unit nurse assigned by the State Health Officer.
29. The value of a field nursing visit. By public health nurses.
30. Program on annual Social Hygiene Day. This is usually first of February.
31. The deficiency diseases and their relation to nutrition. This should be given by the State Nutritionist from the Extension Department in Tallahassee.
32. The Malaria Control Project now being conducted in Escambia County.
33. The Rockefeller Hookworm Survey by a member of the State Board of Health staff.
34. Health insurance debates by members of County Public Health Committee.
35. Health conditions in industrial plants in your community.

Study Reference Material Suggested:

All books listed here can be borrowed from the library of the State Board of Health. The library will also be glad to suggest additional references on each subject:

Bassett, Clara: "Mental Hygiene in the Community", N. Y. Macmillan, 1936.

Bauer, W. W.: "Health, Hygiene and Hoocy". Indianapolis, Bobbs-Merrill, 1938.

- Becker, S. W.: "Ten Million Americans Have it". Philadelphia, Lippincott, 1937.
- Bluemel, C. S.: "The Troubled Mind, A Study of Nervous and Mental Illnesses", Baltimore, Wms. & Watkins, 1938.
- Burhoe, B. W.: "Social Adjustment of Tuberculosis", N. Y. Nat'l Tuberculosis Association, 1934.
- Colcord, Joanna C.: "Your Community, Its Provision for Health, Education, Safety and Welfare", N. Y., Russell Sage Foundation, 1939.
- Educational Policies Commission: "Social Services and the Schools", Wash. the Commission, 1939.
- Escambia County Health Department. Malaria Department: Progress report . . . activities of the malaria department. 1937 to date. Pensacola, the Department, 1937-
- Finney, Roy P.: "Story of Motherhood", N. Y. Liveright, 1937.
- Galdston, Iago: "Maternal Deaths - The Way to Prevention", N. Y. Commonwealth Fund, 1937.
- "Health Problems of Women in Industry", Wash. Government Print. Off., 1931.
- Heiser, Victor: "American Doctor's Odyssey", N. Y. Norton, 1936.
- Hill, Frank E: "Educating for Health", N. Y. American Association for Adult Education, 1939.
- Hiscook, Ira V.: "Ways to Community Health Education", N. Y. Commonwealth Fund, 1939.
- Hodgson, Violet H. "Public Health Nursing in Industry", N. Y. Macmillan, 1933.
- Howard University, Bureau of Education Research: "Health Status and Health Education of Negroes in the United States". Wash. Howard University, 1937.
- Interdepartmental Committee to Coordinate Health and Welfare activities: "The Nation's Health; Discussion of the National Health Conference, 1938", Wash. also "Toward Better National Health", Govt. Print. Off., 1939.

- Mayer, Raymond C.: "How to do Publicity", N. Y. Harper, 1938.
- Milbank Memorial Fund: "Modern Health Trends", N. Y., the Fund, 1938.
- Mustard, H. S., "Introduction to Public Health", Commonwealth, 1936.
- Orr, D. W. and J. W.: "Health Insurance with Medical Care", N. Y. Macmillan, 1938.
- Parran, Thomas: "Shadow on the Land", N. Y. Reynal and Hitchcock, 1937.
- Pratt, George K.: "Your Mind and You", N. Y. Funk and Wagnals, 1937.
- Reed, Louis S.: "Health Insurance", N. Y. Harper, 1937.
- Rose, M. S.: "Foundations of Nutrition", N. Y. Macmillan, 1935.
- Stimson, A. L.: "The Communicable Disease", Wash. Govt. Print. Off., 1939 (Miscellaneous Publication of U. S. Public Health Service No. 30).
- Tobey, J. A.: "Riders of the Plague", N. Y. Scribner, 1930.
- "Women in Florida Industries", Wash. Govt. Print. Off., 1930.

## "THE HEALTH SITUATION IN FLORIDA"

In order to derive the greatest benefit from the American Public Health Association survey of Florida, the County Public Health Committee should give some thought to coordinating its program with that of the state as a whole.

This report enumerates not only the problems but also offers constructive suggestions for meeting them. The suggestions are in the form of recommendations of which more than 20 are listed as of major importance.

A special committee might well be appointed to study the report. In this way the County Public Health Committee will be prepared to assist the State-Wide Public Health Committee more effectively when the time comes to inaugurate the various recommendations.

There should be no hesitancy about accepting these recommendations when it is remembered that, as stated in the first pages of this Manual, they



are so heartily approved by the U. S. Public Health Service, the U. S. Children's Bureau and the Florida State Board of Health. Or, when it is further remembered that several recommendations have already been put into effect.

Briefly, the remaining recommendations of the report are:

- 1) That the State Board of Health be increased to five members appointed by the Governor for long over-lapping terms of office.
- 2) That, subject to the approval of the Governor and to the candidate's qualifications according to law, the State Board of Health be made responsible for the appointment of the State Health Officer.
- 3) That the State Health Officer be privileged to appoint personnel of the State Department of Health with the consent of the Board and providing the candidate is fully qualified.
- 4) That the name of the State Board of Health be changed to the State Department of Health and the State Health Officer to the State Commissioner of Health.
- 5) That Legislation be enacted authorizing the State Department of Health to prepare rules and regulations dealing with all sanitary and



health problems regarding the agency or agencies responsible for their enforcement; it should further provide that the enforcement shall be a function of the duly constituted local health authorities in those areas having full-time health departments.

- 6) That the supervision and control of the fluid milk supply be transferred from the Department of Agriculture to the State Department of Health and that a bureau of milk and food supervision be established in the State Department of Health.
- 7) That all state health laws be intensively studied and rewritten to conform with the modern practice of public health.
- 8) That the state appropriation to the State Department of Health be increased to provide state funds more proportionately to public health needs; to provide extension of syphilis and gonorrhea control; assistance for development of additional health units.
- 9) That a competent public health administrator be employed as deputy commissioner and executive officer.
- 10) That sufficient funds be allocated for the proper training of personnel.
- 11) That, where counties are financially able, they should meet a larger portion of the cost of local health service.
- 12) That a capable epidemiologist be added to the Epidemiology staff for field studies and to act as advisor and consultant to full-time

local health officers through the Section of Local Health Service.

- 13) That a pediatrician be added to the field staff of the Maternal and Child Health Bureau.
- 14) That, through legislation, physicians and midwives be required to put silver nitrate solution in newborn infants' eyes.
- 15) That the number of public health nurses in full-time health units be increased.
- 16) That an additional public health engineer be added to the Bureau of Public Health Engineering, and its program be broadened to include improvement of community and rural sanitation.
- 17) That the housing conditions in Florida be improved.
- 18) That a bureau of malaria and mosquito control be set up with a qualified public health physician at its head.
- 19) That health courses be compulsory in all schools and universities.
- 20) That teachers be required to have adequate health teaching courses and that they be instructed in health teaching methods.

### SUB-COMMITTEES

Each County Public Health Committee should have at least two standing sub-committees, Legislative and Public Relations. Such other standing sub-committees as may be necessary will be determined by local conditions.

The chapters that follow are devoted to the duties of Legislative and Public Relations committees. For details concerning the possible types and activities of other sub-committees, see the Appendix, page 125.

In counties with full-time Health Units, all sub-committees, like the County Committee itself, work with and through the County Health Officer, who is director of the Health Unit. Plans for all programs must be submitted to the Executive Board of the County Public Health Committee, which in turn discusses them with the Health Unit director before they can be inaugurated. This procedure prevents unnecessary confusion and duplication, and also pro-

protects the County Committee against embarking upon a program that might not be in accordance with modern public health practice.

In counties without full-time Health Units, the County Public Health Committee and its sub-committees concentrate their efforts upon the establishment of a full-time Unit. If any other activities are attempted they should be confined to programs of health education which have been authorized by the County Committee's Executive Board.

PUBLIC RELATIONS COMMITTEE

(Publicity and Health Information)

If organizations expect to accomplish big things these days they must have either unlimited finances or unlimited publicity. Since the State-Wide Public Health Committee has no money it must have publicity.

What is true of the State Committee is equally true of its county affiliates. For this reason the Public Relations Committee occupies a key position in the life of the County Public Health Committee. The success or failure of the Public Relations Committee determines whether the door to a brilliant future will be unlocked to the County Committee or whether its program will fall on barren soil and perish for lack of cultivation.

Nowhere is public relations more important than in the administration of health organizations. One of the greatest services public health can render the public is in the amount of accurate health



information disseminated. Utilizing not only newspaper publicity but also radio, exhibits, speakers, motion pictures, posters, window cards and pamphlets, public relations becomes the bulwark of every health education program.

All publicity, and, in fact, the entire program of the Public Relations Committee must be carefully coordinated with the general program of the County Public Health Committee. Releases, speeches, or any other data for public dissemination should go through such a systematic channel of checking and double checking that there is no chance of a story being released without official approval.

Most health topics are technical and untold harm would result if the information released were inaccurate. The County Public Health Committee cannot afford, therefore, to release information that is not accurate

That is why it is suggested in a previous

chapter that the organization's constitution make it obligatory for technical articles on public health and medicine to be read and approved by either the County Health Officer, the County Medical Society, the State Board of Health or the Florida Medical Association, before being authorized for release by the County Executive Board.

Public Relations Chairman - The appointment of a Public Relations Chairman is one of the most serious tasks facing the Chairman of the County Committee. Although the person selected may count upon the state office of the State Committee for assistance and guidance in a publicity program, the County Chairman should make every effort to secure a Public Relations Chairman who has had professional newspaper or publicity background.

In the event it is impossible to secure an experienced person to act as chairman, perhaps someone with newspaper or publicity experience will agree to write the stories and radio scripts,

letting the chairman plan the general program for the Public Relations Committee.

When confronted with the task of planning the County Committee's publicity program, the Public Relations Chairman should concentrate upon utilizing every available channel in his area. A few suggestions are given below in the hope they will prove helpful.

Newspapers - For details concerning preparation of copy the reader is referred to "A-B-C's of Preparing Newspaper Copy" in the Appendix.

Radio - The scarcity of easily accessible broadcasting stations makes radio a somewhat difficult medium in certain areas. However, if stations are accessible, their managers are usually most generous with time. For that reason it is important not to abuse their generosity by either asking too much time, furnishing inadequately prepared scripts or booking speakers who are either unrehearsed or do not have

pleasing voices.

A warm, personable voice is an absolute necessity for a successful radio program, and is what should be sought in scouting around for a speaker. If he or she is prominent in the community or actively identified with public health or medical work, so much the better, for the name will add weight to the message.

Talks and interviews are usually the easiest form of radio broadcast for the amateur to present, Unless, of course, it is the spot announcement, which is no trouble at all to the amateur because he does not make them! The station staff is usually responsible for the delivery of "spots".

Dramatic sketches are better left undone unless it is possible to recruit the services of a proficient drama group with radio experience. It is frequently possible to have dramatizations presented by Little Theatre groups, WPA projects, high school and college theatrical groups.

Speakers Division - This is an important part of the Public Relations Committee and should be painstakingly developed. No speaker should be allowed to go before other groups as a representative of the County Public Health Committee until the County Chairman has made certain that he or she is thoroughly familiar with the subject. If the data needed for preparation of the speech is not available from a Health Unit, the State Committee will be glad to assist in securing the necessary material.

When booking engagements for speakers, it is only fair to make certain the audience will be large enough to compensate the speakers for time and money expended in preparing the speech and making the trip. In presenting invitations to out-of-town speakers it should always be stated very clearly whether or not the organization can afford to pay an honorarium.



or expenses, or both.

The inability to pay either expenses or an honorarium should not deter an organization from inviting an out-of-town speaker, but he should be made aware of this fact. To be indefinite shows lack of experience and may easily lead to unpleasant difficulties.

The Public Relations Chairman should study the chapter on Topics for Meetings, since it is a source of material for both publicity and speeches.

Health Motion Pictures - These should be shown as often as possible. Films may be borrowed from the State Board of Health and from the Florida Tuberculosis and Health Association, headquarters of both of which are in Jacksonville. Someone should be present to discuss the picture and answer questions.

House Organs - Industries' house papers should not be overlooked. They are usually happy to co-

operate with the promotion of good health, and should even be remembered for general releases that do not necessarily pertain to a specific campaign.

Exhibits - These should be carefully placed in the most populated districts if they are to be effective. It is useless to have an elaborate and attractive exhibit hidden in some remote unfrequented place where there is no one to attract. The problem of getting the exhibits can generally be solved by schools, whose faculties are usually glad to have ideas for exhibit subjects.

Posters - Window cards may be used in hotels, banks and theatre lobbies, on counters at grocery department and drug stores, bus and railroad stations, on bulletin boards of schools, churches and club rooms.

Posters for billboards or space on painted sign boards will usually be donated by some public-spirited merchant in the community if he is

asked far enough in advance. Billboard companies are also very generous about donating space when their boards are vacant.

Trailers - Short motion picture trailers are very effective if the County Committee has a few dollars to spend on them. Information on companies making movie trailers may be secured from the State Committee office.

Newspaper Advertising Space - In most instances this can be utilized without cost if the chairman solicits it correctly. The space should only be sought occasionally and then for specific campaigns where it is possible to insert a few words -- perhaps the slogan -- and thereby draw the public's attention to the work. Most merchants who use large amounts of advertising space are glad to insert a line or the campaign insignia in at least one of their ads, and often more.

Handbills - These can be wrapped in packages by merchants. In no case should handbills be

distributed in such a way as to clutter up streets, sidewalks or porches. Not only is this undignified, but it produces a bad psychological effect upon the person for whom the message is intended. Being angered by the untidiness of his premises he is in no frame of mind to pay attention to the message, much less consider it favorably.

Contests - This is a valuable aid in any special campaign. There are many different kinds of contests besides the old standby, the essay. A little imagination should develop novel and effective variations.

LEGISLATIVE COMMITTEE

Someone who has a special liking and aptitude for legislation should be selected as chairman of the County Legislative Committee. For unless this Committee can function efficiently, it had better not be appointed at all.

The first thing the Legislative Committee should do is conduct an investigation of all existing health laws. These may be found on both county and municipal books.

Laws should be studied and analyzed to determine whether (1) they are up-to-date (2) they are the best laws available for the purpose they propose to serve.

Whether or not laws are being enforced is also something to be considered by the Committee. If they are not being enforced, the Legislative Committee might make inquiries to determine the reason. In the event the law is obsolete, the Legislative Committee should gather data and make



tions to the County Executive Board. Such recommendations might state that the law should be repealed, or they might advocate replacement with a modern law.

Under no circumstances should any legislative changes affecting public health be undertaken unless they have been approved by either the director of the Health Unit or the State Health Officer.

It should be the duty of the Legislative Committee to comb all county newspapers for reports of any legislation that might affect public health, such as water supply, boards of health, sanitation, clinics for indigents, etc.

When such items are found, a copy of the proposed legislation should be secured. It should be carefully analyzed and compared with standards set up by official health departments, either city, county, state or national, to determine whether it is good or bad legislation.

A report of the findings should be made immediately to the County Chairman and referred to the County Executive Board for action. This will frequently result in a delegation from the County Public Health Committee going before councils and commissioners to voice their opinion and wishes and thus give lawmakers the benefit of their first-hand knowledge of public health.

In order to be a source of information to the general membership of the County Public Health Committee, the Legislative Committee should familiarize itself with the following laws: The U.S. Public Health Service Standard Milk Ordinances\*; Meat Inspection ordinances\*; laws governing licenses to practice medicine which prohibit all but medical doctors from administering narcotic drugs; the County Health Unit law; County Board of Health law; etc.

The Committee should study local and state laws

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Information available from State Board of Health

pertaining to public health administration, including appropriations, and should carefully consider the legislative recommendations outlined by the American Public Health Association in "The Health Situation in Florida".

Below are just a few additional questions the Legislative Committee could study to advantage:

How many communities in the county have milk ordinances? Do they conform to the latest U. S. Public Health standard ordinance which is considered the best municipal legislation available governing milk production and legislation? What ordinances are there governing the production, distribution and handling of food and food products?

### KEEPING THE COMMITTEE ACTIVE

Whether or not a County Committee remains active depends to a great extent upon its Chairman. He, or she, should occupy a position of prestige in the community, have a genuine interest in its welfare and a firm conviction that that welfare can best be promoted through proper health protection. In addition, he must also possess that intangible and illusive something called leadership. Reduced to its essentials, leadership means an embodiment in one person of an innate ability to get along with other people, plus the driving force of ambition and accomplishment.

The Chairman must keep the organization busy but must not overload those members who are unable or unwilling to be active. The fact must be recognized and accepted that only a few persons will do the actual work in any organization.

The remainder of the membership will bask

in the reflected glory of a job well done. Nevertheless, they are just as important to the organization as the more active members. Much educational material of inestimable value flows through them. They may influence many persons to whom the more active members have no access, thus counterbalancing their non-participation in the routine business of the Committee.

There is so much to do that no Committee should become inactive for lack of an interesting program. If the Committee has difficulty in drawing up such a program, the state office will be glad to offer suggestions either by mail or through personal consultation.

To stimulate community interest and pride in the Committee, a Health Award might be given annually to the citizen in the county (exclusive of state or local health department personnel) who has contributed the most to the advancement of public health during the year, irrespective



of whether or not he is a member. Suitable ceremonies should accompany the award presentation in order to impress not only the recipient but the public and the Committee members themselves. This idea is enlarged upon in the chapter on Meetings, under the sub-head "Annual Meeting".

Proper distribution of responsibility among Committee members will also do much to keep them interested. The more the members can be made to feel personally responsible for the Committee, the more successful the organization will be.

## HOW ORGANIZATION IS FINANCED

The State-Wide Public Health Committee requires no membership dues. However, nothing in the constitution prohibits raising funds for a specific purpose if it becomes necessary. County affiliate committees may specify nominal dues to take care of postage and other clerical necessities if they so desire.

Quite a few County Public Health Committees raise funds for purposes incidental to carrying on their program. The Hillsborough County Health Unit Auxiliary, affiliated with the State-Wide Public Health Committee, recently raised \$1,500 to purchase a mobile clinic for the Health Unit. Since no dues are required of its 200-some-odd members, the money was raised from contributions solicited by members. They were assisted in the drive by newspaper editors who became interested in the project.

Cost of stationery, postage, publicity. re-

leases, bulletins and services of an Executive Secretary for the State-Wide Public Health Committee are borne by the State Board of Health. They also supply two field workers in the persons of supervising nurses who serve the state at large. The Committee work done by both the Executive Secretary and the field representatives is in addition to their routine duties as State Board of Health staff members.

County Committees receive certain supplies and services from the state office. A limited amount of mimeographing service is obtainable in addition to letterheads and membership cards for county committees.

Every member of every County Committee receives a copy of "The Health Situation in Florida", and his or her name is placed on the mailing list of Florida Health Notes, official monthly publication of the State Board of Health.

In counties with full-time Health Units a certain amount of clerical assistance is available from the Unit. In unorganized counties, the Coun-

ty Committee must look to the State Committee headquarters for this assistance.

REPORTS

Quarterly activity reports are required of all County Committees on the first of January, April, July and October. A brief annual report must also be filed with the Committee's state office. Forms for these reports are available from State Committee headquarters, P. O. Box 210, Jacksonville.

These forms include such information as:

Number of meetings held  
Total membership  
New members since last report  
Program for next quarter  
Funds raised and for what purpose  
Conferences in which Health Unit was assisted.

- (a) school
- (b) home
- (c) clinics

Summary of Committee's activities:

- (a) Classes organized in Home Hygiene through State Board of Health Nursing Bureau
- (b) Equipment secured for Units of centers
- (c) Rooms secured, etc.



Sub-Committee programs:

- (a) Standing
- (b) Special

As soon as the organization of the County Public Health Committee is completed, a graphic picture of the county should be furnished State Committee headquarters. This is supplied on a report form known as the County Health Questionnaire.

The Questionnaire sets forth in brief these basic facts concerning phases of county life and environment that may affect either directly or indirectly the public's health. The form is distributed by state headquarters and will be revised at intervals until a Health Unit is established. In this way, an accurate check is maintained to determine whether the county is progressing or regressing.

Other than these three reports, the state office does not burden county affiliates with the making of time-consuming records which are of

doubtful value. The State Committee prefers that County committees spend their time on projects beneficial to the counties in which they are located.

## WHAT IS PUBLIC HEALTH?

Those who confuse public health with state or socialized medicine are laboring under an entirely erroneous conception.

Public health is strictly a preventative science. Its purpose is to eradicate the conditions that breed those diseases which medical science has, through years of research and experiment, rendered preventable and, therefore, unnecessary. Its further purpose is to promote good health and encourage healthful living.

In the course of carrying on its program, public health finds many persons suffering from early stages of diseases they do not suspect they have. Such persons, unless indigent\*, are promptly sent to their family physician for diagnoses and treatment. Public health is responsible for sending to doctors many persons who

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\*Decision of what constitutes indigency is left to the County Medical Society and County Welfare Board.

might never have sought medical attention had the need not been discovered by the Health Officer. Thus, the public health worker in the full-time Health Unit becomes one of the strongest allies of the private physician. Doctors' already overloaded charity burden is also lightened by a full-time Health Unit.

Public health sees in preventable disease not a condition to be cured, but a condition to be eradicated. Public health looks at a person with malaria and sees not a sick man alone, but also the mosquito that transmitted the disease germ to the man. It sees also the undrained land that bred the mosquito that gave the man the germ. Public health knows that this man ..... and thousands of other men ..... can be neither permanently cured nor safe until the land is drained and malaria mosquitoes no longer have a place to breed.

Public health sees in a child or adult suf-

fering with hookworm disease, not someone lazy and dull-witted, but someone sick and in need of help. Public health knows that a sanitary means of disposing of sewage must be put into effect before permanent cure can be effected. For no matter how much medicine a person takes or how many times he is cured of hookworm disease, that person is in danger of re-infection as long as he comes in contact with worm-infested soil which surrounds insanitary privies and spreads from them to the adjacent ground.

Public health looks at syphilis, typhoid, diphtheria, tuberculosis, pellagra, in much the same way . Medical science has learned not only how to cure but how to prevent all these diseases. Therefore, they could be eradicated if the problem were jointly attacked by public health, organized medicine and the public itself.

Because disease recognizes no color or class distinction, public health recognizes none.



The servant who goes into the home is just as much a public health responsibility as the master or mistress of that home. For the servant may be the carrier of syphilis, tuberculosis, typhoid, diphtheria, and many other communicable diseases.

The wealthy man and the poor man who sit side by side in church or at the movies are equal responsibilities of public health. For, who knows what disease one may bring to the other if either is neglected by public health.

Historical Significance - Were it not for public health, modern cities would not exist. Public health has behind it a history which began when men first started herding themselves together in small areas.

The concentration of people and, hence, the proximity of disease, resulted in plagues and epidemics that could be combatted only on a community basis. At first, public health was merely a quarantine and police service. Then it became a

sanitation service. Now, as a service and science of prevention, it goes even more deeply to the root of the trouble.

Today public health is administered in the United States by official health departments operating on national, state and local levels. At the top there is the U. S. Public Health Service, directed by a surgeon general appointed by the President of the United States. This is a government agency quite distinct from the American Public Health Association, the latter being a professional group which is to the public health worker what the Bar Association is to the lawyer of the Medical Association to the doctor.

The federal agency sets up standards of service and personnel and allocates money to state health departments on a basis of population, proof-of-need and matching-of-funds. The federal government does not attempt to run the state health department any more than the state attempts

or wants to run a county or city health department.

As the state health department acts in a consultant capacity to the county Health Unit, so do the U. S. Public Health Service and U. S. Children's Bureau act to state health departments. Of course, the federal agency does have the privilege of withdrawing its funds if their standards are not adhered to. This power is undoubtedly one of the strongest factors in promoting and maintaining increasingly higher standards.

Federal funds were recently increased considerably with money made available through the Social Security Act. The U. S. Children's Bureau likewise allocates money to state health departments and, through them, to counties for maternal and child health work.

The Voluntary Agency - Official health agencies should not be confused with voluntary health agencies, such as cancer, tuberculosis, social hygiene, heart and similar associations. Although the two cooperate in their programs, they are en-

tirely separate. Official agencies are supported by tax monies, voluntary agencies by voluntary contributions.

The place of the voluntary agency in the health panorama is an extremely important one. Its functions are (1) Health education (2) Demonstration of these health activities which have not yet reached the point where they can be supported by tax funds (3) Research work (4) Temporary filling of gaps in the program of official health departments.

There can never be too much health education or research. Therefore, these functions are perpetual with voluntary health agencies. On the other hand, when the demonstration activities of voluntary health agencies have been brought to the point of development where they can be taken over by the official health department, the transfer is made and the voluntary agency seeks new fields.

Public Health as a Career - Public health offers a field rich in possibilities for the young

person choosing a career. It provides unlimited opportunities for advancement and is one of the few professions wherein the supply is less than the demand.

The man or woman planning a public health career today, however, must look well to his educational preparation and training. Very definite qualifications are now being enforced.

It is no longer possible for a nurse, simply because she is a registered nurse, to secure a public health nursing position unless she has had special training in public health. It is no longer possible for the graduate medical student to go from college into the health department without first passing an examination for a license to practice medicine, and having, in addition, special training in a recognized school of public health.

In short, public health is no longer a hit-or-miss profession. It has taken its place among the great humanitarian sciences. The public should



feel increasingly secure in the knowledge that hereafter neither personal prestige nor politics can open the door to a public health position if the person does not meet minimum standards of qualifications and training.

AS OTHERS SEE IT

The following editorial comments are indicative of the importance with which the press of Florida regards the work of the State-Wide Public Health Committee. These excerpts were taken from 375 inches of editorial columns which the editors have seen fit to write over and above 2,280 inches\* of stories in their news columns!

"Outstanding in the records of progress Florida has made during the year is the rapid development of interest among laymen in our public health problems. Starting from scratch just six months ago, a State-Wide Public Health Committee was organized, with John F. Ingle, Sr., of Jacksonville as chairman. Now all of Florida's 67 counties have chairmen and co-chairmen, and most of these have county committees, actively engaged in assisting county health units in determining

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\* As of November 11, 1939.

the health needs of the community and helping to correct health deficiencies.

"The health councils and affiliated local state-wide committees throughout the state are merging in order to prevent duplication of purpose. We are proud to report that the Hillsborough County Health Unit Auxiliary with its organization of more than 250 members, is playing an active part in the program.

"This growing interest signifies a bright future for the health of Florida citizens. For too long we have been attempting to fight our health problems with too small a force. It has been like fighting a \$1,000,000 fire with a bucket brigade.

"The sad part of it all is that our four major health threats in Florida, malaria, hookworm, syphilis and tuberculosis, are all preventable and curable. In the face of knowing how to rid ourselves of these costly diseases we permit

them to continue.

"Now the public health workers, practicing physicians and an educated public are joining forces on a cooperative effort to correct these health problems. It will take time, money and continuous effort to eradicate these diseases. But the start has been made and the battle will be won." TAMPA TRIBUNE November 11, 1939.

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".....Even a glance at this brief summary of aims (Committee's objectives) is sufficient to show that the committee of 2,000 members has set for itself a task that will run through the years. It is a task moreover, that calls for the fullest possible understanding and sympathy of people generally and public servants particularly if it is to be carried out successfully .....Volusia county's public health committee has already been appointed in line with the localized setup called for the state committee. It remains for the Volusia group to

bring into realization in this county one of the immediate objectives of the state organization ... the formation of a full-time county health unit." DAYTONA BEACH EVENING NEWS November 6, 1939. .

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"A contagious interest in public health is sweeping Florida in epidemic form. Nobody is trying to stop it. On the other hand, a state-wide committee is urging it on. Public health in this state, more than anything else that is public, is fast becoming everybody's business." JACKSONVILLE JOURNAL. November 3, 1939.

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"Florida's Public Health Committee, organized on a permanent basis with the election of John P. Ingle, Sr., of Jacksonville as president, has a great amount of work cut out for it in attempting to put into practice many of the recommendations of the American Public Health Association's survey of the state's health needs,



Mr. Ingle's recent appointment as general manager of the Associated Industries of Florida gives him a better vantage point from which to carry forward his health endeavors. For what industry is not interested, financially as well as civically, in the health of the people. Health makes for good workmen and more efficiency ..... " PENSACOLA NEWS November

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"..... Mr. Ingle made an excellent showing for Florida before the convention (Pittsburgh), stating that the chambers of commerce, recognizing the conditions, are taking a leading part in the movement to establish full-time health units in every county ..... " OCALA STAR October 23, 1939.

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Among the important news items of last week here was the announcement that a Monroe County Health Committee had been selected to cooperate with the State-Wide Public Health Committee in dealing with public health problems .... " KEY WEST CITIZEN October 25, 1939.

".....All these efforts are properly making State health work an aggressive movement rather than simply a standby force which doesn't go into action until after an epidemic or dangerous conditions have already appeared. Public health requires constant attention." TAMPA TIMES October 7, 1939.

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".....It's a fine thing that there are citizens among us who have the interest, plus the time and money to gallivant around and talk seriously to people in other counties and finally generate some talk into action ..... In the end, employment of full-time local health experts for which we hope Mr. Newald (District 4 chairman) will create a demand, will alleviate much of this suffering and save human lives. Is there a greater cause for which to fight?" ORLANDO SENTINEL April 22, 1939.

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"..... With problems to be even more

closely defined as a result of the survey, it is fortunate that each locality represented in the State Committee will be allowed to undertake solution of a local problem first." TAMPA TIMES July 26, 1939.

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"..... We cannot take our health problems in Florida too seriously. In any state good health conditions are an asset, but in Florida they are a definite part of what we have to sell. Health conditions in resort areas of Florida are on the whole excellent. In some other parts of the state they are not so good. This shown by a 60-page summary on 'The Health Situation in Florida' just released by the American Public Health Association ..." DAYTONA BEACH EVENING NEWS August 11, 1939.

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"Recommendations by the American Public Health Association, after a state-wide survey of Florida health conditions, of establishment of more county

health units as the best method of overcoming public health problems, it is interesting to note in FLORIDA HEALTH NOTES, publication of the State Board of Health, just what is expected of a county health unit ..... (all services were listed) ..... " PENSACOLA JOURNAL.

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"No state should be more interested in safeguarding public health than Florida. No state is more blessed with natural conditions contributing to good health. No state has a greater public health responsibility because the health of thousands of visitors as well as residents must be protected ..... These facts indicate the value of a recent report by the American Public Health Association on 'The Health Situation in Florida' ..... TAMPA TIMES August 29, 1939.

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"..... In line with recommendations of the American Public Health Association which

recently made a survey in Florida, the State Health Department is abolishing 'mediocre, ineffective and extravagant' health districts and concentrating on the organization of County Health Units. It is encouraging to see a state agency, particularly one concerned with public health, acting on the recommendations of experts instead of the wishes of politicians." TAMPA TIMES November 7, 1939.



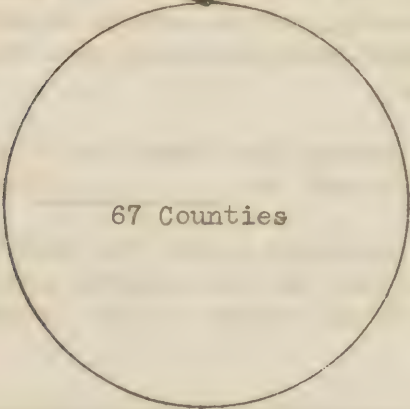
## APPENDICES



State  
President

Executive Board

Seven Districts Each with Chairman and Co-Chairman						
1	2	3	4	5	6	7



67 Counties

Each County has County  
Chairman and Co-Chairman,  
Executive Board, County-dis-  
trict committees and such  
sub-committees as may be  
desirable locally.

SUGGESTED CONSTITUTION FOR COUNTY AFFILIATES  
of  
STATE-WIDE PUBLIC HEALTH COMMITTEE

Article I

Name

Section 1 - The name of this association shall be  
the \_\_\_\_\_ County Public Health Commit-  
tee.

Article II

Objects

Section 1 - To secure a survey by the State Board  
of Health of the health needs and resources  
of the community, and to assist in carrying out  
the recommendations presented as a result of  
this survey.

Section 2 - To secure the formation of a full-time  
county health unit in \_\_\_\_\_ County.

Section 3 - To actively assist the county health  
unit in carrying out its program under the guid-  
ance and with the advice of the County Health  
Officer.

Section 4 - To cooperate with and assist the State  
Wide Public Health Committee in its work of dis-  
seminating information concerning public health  
problems as recommended in the American Public  
Health Association state-wide survey, "The  
Health Situation in Florida".

### ARTICLE III

Section 1 - The membership of the \_\_\_\_\_ County Public Health Committee shall consist of not less than 15 persons.

Section 2 - Persons eligible for membership are representatives of the various civic, fraternal, and religious organizations in the county, and those leaders interested in the development of community health. Every area in the county should be represented. Some of the special organizations that should be represented are: Parent-Teachers, American Legion, Medical Society, Dental Society (or in the case of no organized societies, as many medical doctors and dentists as practicable), Pilot, Business and Professional Woman's Club, all local Women's Clubs, Rotary, Kiwanis, Lions, Optimist, Civitan, Exchange and similar civic organizations; Chamber of Commerce, Junior Chamber of Commerce, organized labor, County School Superintendent, representatives of newspapers, Community Chest, County Commission, Budget Commission, County School Board, mayors and others.

### ARTICLE IV

Section 1 - The officers of the \_\_\_\_\_ County Public Health Committee shall be a President, one or more Vice-Presidents, and a secretary-treasurer. Their duties shall be those usually prescribed for such officers. The treasurer shall post a bond.

Section 2 - Election - Officers shall be elected



at the annual meeting for a term of one year. The election shall be by ballot and a majority of votes cast shall be necessary to elect. No member of the local or state health department shall be eligible to hold office.

## ARTICLE V

### Committees

Section 1 - The President shall appoint standing committees as follows: Executive, Public Relations, Legislative, and such other committees as the Committee may from time to time direct.

### Section 2 - Duties of the Committees -

Executive Board: To formulate the policies of the Committee. To coordinate the program of the various committees and, in counties having Health Units, to keep in close touch with the Health Officer in order to cement their inter-relationship.

Publicity: To release advance and follow-up notices in all county newspapers concerning all meetings and such other activities of the Committee as may be deemed of public interest; to arrange speeches before local groups and on the radio; to secure the dissemination of such other public health information as may be of assistance in promoting the objects of the Committee. All releases and speeches shall be approved by either the local Health Officer, the State Health Officer, the local Medical Society or Florida Medical Association.

Legislative: To study and become familiar with all legislation pertaining to administration of

public health in Florida and to report to the \_\_\_\_\_ County Public Health Committee any recommendations for action that might be deemed advisable. No recommendation for action on state legislation shall be presented to the County Committee without first securing the advice and opinion of the Executive Board of the State-Wide Public Health Committee.

## ARTICLE VI

### Meetings

Section 1 - Regular Meetings: Regular meetings shall be held at such time and place as the committee shall designate.

Section 2 - Special Meetings: Special meetings may be called at any time by the President or at the written petition of one-fifth of the membership of the committee.

Section 3 - Annual Meetings: The annual meeting shall be held on the \_\_\_\_\_ day of \_\_\_\_\_ of each year. At least \_\_\_\_\_ days written notice in advance of the meeting must be given to all members.

## ARTICLE VII

### Quorum

Section 1 - A quorum shall consist of \_\_\_\_\_ members of the committee and a majority vote

of those present shall decide all questions.

ARTICLE VIII

Section 1 - This constitution may be amended by a majority vote of those present and voting at any meeting of the Committee providing the membership of the Committee has been furnished with a copy of the proposed amendment not less than two weeks in advance of the meeting at which it is to be considered.

Adopted this \_\_\_\_\_ day of \_\_\_\_\_ A. D., 19\_\_\_\_

\_\_\_\_\_  
President

CHARTER MEMBERS

_____	_____
_____	_____
_____	_____
etc.	etc.

ATTEST:

\_\_\_\_\_  
Secretary

## LOCAL COUNTY HEALTH UNIT LAW\*

AN ACT Relating to the Public Health and to the control of Preventable Diseases, and to Authorize Counties of the State of Florida to cooperate with the State Board of Health in the Establishment and maintenance by the State Board of Health of Full-Time Local Health Units Therein, and to Levy and Collect Special County Taxes Therefor, and to Authorize Two or More Counties to Agree Upon Joint or Concurrent Action to Effectuate the purposes of this Act.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF FLORIDA:

Section 1 -That the several counties of the State of Florida, and cities therein, are hereby authorized to cooperate with the State Board of Health in the establishment and maintenance of full-time local health units in such counties for the control and eradication of preventable diseases, and to inculcate modern scientific methods of hygiene, sanitation and the prevention of communicable diseases.

Section 2 - To enable such counties to execute the purposes of this Act, every county in the State with a population exceeding one hundred thousand (100,000), according to the last State Census, is hereby authorized to levy an annual tax of not exceeding one half ( $1/2$ ) mill, and every county in the State with a population exceeding forty thousand (40,000), according to the last State Census, and not exceeding one hundred

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\* Chapter 14906 (No. 268) General Laws of 1931



thousand (100,000) is hereby authorized to levy an annual tax of not exceeding (1) mill, and every county in the State with a population not exceeding forty thousand (40,000), according to the last State Census, is hereby authorized to levy an annual tax not exceeding (2) mills, on the dollar on all taxable property in such county, the proceeds of which, when collected, shall be paid to the State Treasurer for the account of the State Board of Health. Such funds in the hands of the State Treasurer shall be known as the full-time local health unit funds of the county by which such funds were raised; and said funds shall be expended by the State Board of Health solely for the purpose of carrying out the intent and object of this Act in such county. The State Board of Health shall render to the County Commissioners of any such county providing such funds a semi-annual financial statement of the disbursement thereof, so long as said monies shall continue to be disbursed by or under the direction of the State Board of Health.

Section 3 - That the County Commissioners of every county are hereby authorized to agree with the State Board of Health upon the expenditure by the State Board of Health in such counties of any funds allotted for that purpose by the State Board of Health or received by it for such purposes from private contributions or other sources, and such funds shall be paid to the State Treasurer and shall form a part of the full-time local health unit fund of such county, and shall be expended by the State Board of Health solely for the purpose of this Act. The State Board of Health is further authorized to arrange and agree with the United States Government through its duly



authorized officials for the allocation and expenditure by the United States of funds of the United States in the study of the causes of diseases and prevention thereof in such full-time local health units when and where established by the State Board of Health under this Act.

Section 4 - That the personnel of the minimum full-time local health unit shall consist of a director, who shall be a doctor of medicine, a public health nurse, a sanitary officer and a clerk. All of the members of such personnel shall be selected from those especially trained in public health administration and practice, so far as the same shall relate to the duties of their respective positions. They shall be employed by the Board of County Commissioners, provided, however, that no such personnel shall be employed by the Board of County Commissioners unless such said personnel shall be approved by the State Health Officer. The duties and compensation of said personnel shall be fixed and determined by the State Board of Health upon the approval of the Board of County Commissioners. Such employees shall devote their entire time to the control of preventable diseases and the education of the public in modern scientific methods of sanitation, hygiene and the control of communicable disease in cooperation with and under the supervision of the State Board of Health.

Section 5 - That it shall be lawful for two or more counties to combine in the establishment and maintenance of a single full-time local health unit for the counties which combine for the purpose as aforesaid, and pursuant to such combination or agreement such counties may cooperate with one another and the State Board of

Health and contribute to a joint fund in carrying out the purpose and intent of this Act. The duration and nature of such agreement shall be evidenced by resolutions of the Board of County Commissioners of such counties and shall be submitted to and approved by the State Board of Health. In the event of any such agreement, a full-time local Health Unit shall be established and maintained by the State Board of Health in and for the benefit of the counties which have entered into such an agreement; and, in such case, the funds raised by taxation pursuant to this Act by each county shall be paid to the State Treasurer for the account of the State Board of Health and shall be known as the full-time local Health Unit fund of the counties so cooperating. Such funds shall be used and expended by the State Board of Health for the purpose specified in this Act in the counties which have entered into such agreement. In case such an agreement is entered into between two or more counties, the work contemplated by this Act shall be done by a single full-time local Health Unit in the counties so cooperating, and the nature, extent and location of such work shall be under the control and direction of the State Health Officer.

Section 6 - All laws or parts of laws in conflict with this Act are hereby repealed. If any portion of this Act shall be held unconstitutional or unenforceable, it is hereby declared to be the purpose of the legislature that the remainder of said Act shall not be affected thereby, insofar as the same may be found to be unenforceable or unconstitutional.

Section 7 - This Act shall take effect upon

its becoming a law.

(Effective June 4, 1931)

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On January 15, 1940 the 15 full-time Health Units in Florida serving 17 counties were: Bay, Broward, Duval, Escambia, Franklin-Gulf, Gadsden, Highlands, Hillsboro, Jackson, Lake, Leon-Wakulla, Monroe, Orange, Pinellas, Taylor.

#### Medical Society Approval

Although it is not a matter of law that personnel of Health Units be approved by the local Society, the policy of the State Board of Health and the U. S. Public Health Service is to recommend to County Commissioners for employment only those persons who meet the approval of the local Medical Society. The County Health Officer must be eligible for membership in the local Medical Society and should join as soon as possible.

In addition to medical qualification, Health Officers engaged in full-time Units must have special training in public health and be desirous of making that their career. This requirement lessens the possibility of Health Officers capitalizing upon their position in the community to build up a private following, a practice which is frowned upon by the State Board of Health. One state department of health in this country prohibits local Health Officers from going into private practice in the community in which they are Health Officers until one year has elapsed after their resignation.

### County Boards of Health

The Florida Constitution provides for establishment of County Boards of Health. Application must be made to the State Legislature. A County Board of Health has power to supervise the personnel and activities of the Health Unit in that County.

### City-County Units

When Citizens of a County desire one health department to take care of the entire county, a City-County Health Unit may be established with jurisdiction both inside and outside corporate city limits within the County. City-County Health Units are considered by public health authorities to be a move towards the greatest economy and efficiency because the responsibility for all public health administration in the County is vested in one organization.



SUB AND DISTRICT COMMITTEES

In counties with full-time Health Units, the sub and district committees of the County Public Health Committee perform their various functions under the guidance of the Health Unit director. All programs clear through his office before being approved by the Committee's Executive Board and passed to sub and district committees.

In counties without Health Units, the various sub and district committees necessarily are limited to (1) Acquainting the public, particularly the medical profession, with the State Board of Health policy of operating Health Units with the approval of the Medical Society (2) Securing a county survey of outstanding health problems (3) Dissemination of educational health information designed to create public demand for protection against preventable diseases and a full-time Health Unit as the only adequate protection against these diseases.



Avoiding Duplication - In some counties the County Public Health Committee and sub and district committees may encounter groups already engaged in some particular phase of work the Committee would like to undertake, such as furnishing transportation for indigents, school health, home hygiene, etc. When confronted with this situation the Committee should not set up a competitive program in that phase of work, but should ask the established group to become part of the County Public Health Committee.

Such a move should prove mutually beneficial. The County Public Health Committee would avoid duplication of effort and perhaps of misunderstanding between itself and the other group, while the other group would be able to standardize its program in accordance with the state-wide plan which is based on the most modern public health procedures.

Number of Sub and District Committees - No fixed rule can be laid down regulating the number and

type of sub committees necessary to successfully carry on the work of the County Public Health Committee. These vary according to local conditions and the particular problems confronting the county.

As stated in the chapter, "Organizing the County Committee", county district committees form the bulwark of the county structure. It is quite possible that the district committees will be divided into several standing sub-committees in addition to the two basic sub-committees of Public Relations and Legislation.

Among the other possible sub-committees are:

Library - Perhaps the librarian of a public library will serve as chairman of this committee or at least act in an advisory capacity to the chairman. The State Board of Health maintains a medical library at its headquarters in Jacksonville. The full-time librarian in charge will be glad to assist any County Library chairman with a program.

The possibilities of the Library Committee are unlimited. It can work through the schools to see that an adequate supply of health books is available. Its members should keep themselves informed on current health publications, both books and articles. Brief reviews of their findings should be circulated among the general membership of the County Public Health Committee as well as the general public. This can be accomplished through reviews published in newspapers or broadcasts over the radio.

In counties having Health Units, the Library Committee should assist the County Health Officer in establishing a lending library at the Unit Headquarters, gradually expanding to branch libraries at county district headquarters in the county. Medical members of the Committee could be charged with the duty of assisting hospitals in the county in the establishment and expansion of their libraries for the use of the staff.

Maternal and Child Health Committee - This committee can operate a health education program even if the county has no full-time Health Unit. But naturally, its work will be more effective where there is a full-time Health Unit to carry on actual programs in maternal and child health.

In counties without full-time Health Units, this committee may carry on an educational campaign among expectant mothers, encouraging them to see their family doctor as early as possible in pregnancy, and urging that they receive frequent professional instruction in caring for infants during the first year of life and periodically thereafter. Pamphlets and material on this subject may be requested from the State Board of Health, Jacksonville.

In counties with Health Units, the Maternal and Child Health Committee works very closely with the Health Unit director and supervising nurse, reporting to them the names of expectant



mothers, assisting with conferences, etc.

School Health - This subject is so extensive and has so many ramifications that it will necessitate a strong leader as chairman and a vigorous approach to the multiphased program. The School Health Committee should not only read and study, but literally memorize Florida's new School Health Program which has been published in bulletin form, available from State Board of Health.

The School Health Committee can do much to familiarize the public with the new school health bulletin and it is urged that they emphasize this in their program. Speakers on the subject are available from the State Board of Health and the State Department of Education.

The School Health Committee should be a great source of material for the County Public Health Committee meetings as well as for talks before other civic groups.

Dental Health - This committee should help establish a dental health education program in the county. Material is available from the State Board



of Health, Jacksonville.

In Bay, Escambia, Pinellas, Hillsborough, Duval Dade, Orange and Palm Beach counties where dental clinics for indigents are being operated, the committee members might assist in the clinics. In counties not having dental clinics, this committee can assist in seeing that some provision is made for those children who are dental indigents. Before such a project is undertaken, however, the County Public Health Committee should write the State Board of Health for assistance in formulating the plan of procedure, since it must be worked out in conjunction with the Board of Health and the Florida Dental Society.

The State Dental Society is organizing a state-wide speakers' committee that may also be utilized by the Dental Health Committee of the State-Wide Public Health Committee. Engagements for such speakers should always be arranged with organizations that can provide large enough au-

diences to warrant the time and expense to which the speaker is subjected in traveling a distance to make the talk.

Tuberculosis - This committee should assist the Health Unit in any way the Unit may direct, such as referring tuberculous persons to the Unit, assisting at conferences, keeping records, etc.

Venereal Disease - In counties without Health Units this committee confines itself to an educational program. Speakers may appear before clubs and other organizations, urging periodic examinations to uncover syphilis in the early stage when it may be cured, and stressing the necessity for continuous, uninterrupted treatment if the cure is to be effected. Apply to the State Board of Health for material.

Doctors serving on this committee might be interested in having a technical picture on the treatment of syphilis shown at their County Medical

Society meetings. The film is for doctors only and is a recent production. It may be procured from the State Board of Health, Jacksonville.

Home Hygiene - Assembling and care of equipment, recruiting students for Home Hygiene. For further information apply to State Board of Health.

Transportation - Assist in transporting indigents to conferences, doctors' offices or hospitals when necessary.

Loan Closets - In counties with Health Units, layettes and sterile obstetrical packs may be made and distributed.

Committee on Records - In counties without Health Units, campaigns on improved reporting of births and deaths to local registrars may be carried on. The Bureau of Vital Statistics, State Board of Health, will be glad to cooperate with any registration campaign.

Committee on Clerical Assistance - Keep records, summarize reports for nurses, make extra copies, etc.

Building Committee - In counties with Health

Units this committee operates as a special county district sub-committee to procure a building to house the center's offices and conference rooms.

Others - Other committees that may be desirable in counties with full-time Health Units, where surveys and campaigns are in progress include Malaria, Hookworm, Pellagra, Sanitation, Milk sanitation, etc.

NEWSPAPERS IN FLORIDA BY COUNTIES\*ALACHUA

Papers**	Circulation	Town
Gainesville Sun (E)	3,610	Gainesville
Florida Alligator	3,300	Gainesville
Florida Alumnus		Gainesville
Florida College Farmer (W)		Gainesville
High Springs Telegram (W)	1,045	High Springs

BAKER

Baker County News (W)		Macclenny
Baker County Press (W)		Macclenny

BAY

Panama City News Herald (E)	5,165	Panama City
Panama City World (W)		Panama City

BREVARD

Cocoa Tribune (W)	1,200	Cocoa
Melbourne Times		Melbourne
Titusville Star-Advocate (W)		Titusville

BROWARD

Broward Home News		Ft. Lauderdale
Ft. Lauderdale News (E)	5,257	Ft. Lauderdale
Hollywood Herald (W)	1,210	Hollywood
Hollywood News (W)	1,100	Hollywood
Hollywood Sun (W)		Hollywood

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\* 1939 edition, N. W. Ayer Newspaper Directory

\*\* (E) represents evening paper; (M) morning;

(W) weekly and (Mo) monthly



BROWARD (Cont.)

Pompano News (W)	Pompano
Pompano Sun (W)	Pompano
Tattler (W)	Hollywood

CALHOUN

Blountstown Record (W)	Blountstown
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CHARLOTTE

Punta Gorda Herald (W)	1,059 Punta Gorda
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CITRUS

Citrus County Chronicle (W)	1,300 Inverness
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CLAY

Clay County Crescent (W)	Green Cove Spgs.
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COLLIER

Collier County News (W)	Everglades
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COLUMBIA

Columbia County Gazette (W)	Lake City
Lake City Reporter (W)	1,976 Lake City

DADE

Florida Duetsches Echo (S-M)	3,072 Miami
Friday Night (W)	Miami
Florida Motorist (Mo)	Miami
Hialeah Herald (W)	2,113 Hialeah
Jewish Floridian (W)	Miami
Leader-Enterprise (W)	Homestead

DADE (Cont.)

Little River Sun (W)		Little River
Miami Beach Times		Miami Beach
Miami Beach Tropics		Miami Beach
Miami Citizen (W)		Miami
Miami Floridian (W)		Miami
Miami Herald (M)		Miami
Miami Riviera (E)		Miami
Miami Times (W)		Miami
Miami Tropical Dispatch (col)		Miami
Miami Daily News (E)	34,394	Miami
North Miami Floridian (W)	1,060	Miami
Pan American News (Mo)		Miami
Redland District News (W)		Homestead
Society Pictorial (W)		Miami

DESOTO

Arcadia (W)	1,828	Arcadia
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DIXIE

Dixie County Advocate (W)	500	Cross City
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DUVAL

Baptist Witness (W)	7,200	Jacksonville
Financial News (E)		Jacksonville
Florida Christian (W)	78,800	Jacksonville
Florida Farm & Grove (Mo)		Jacksonville
Florida Good News (W)		Jacksonville
Florida Municipal Record	1,539	Jacksonville
Florida Public Works (M)		Jacksonville
Florida Searchlight (W)		Jacksonville
Florida Sentinel (col)		Jacksonville
Florida Tattler (W)		Jacksonville
Florida Times-Union (M)	71,418	Jacksonville

DUVAL (Cont.)

Fraternal Record (Mo)		Jacksonville
Herald, The (W)		Jacksonville
Jacksonville American (W)		Jacksonville
Jacksonville Floridian (W)		Jacksonville
Jacksonville Journal (E)	39,895	Jacksonville
Jewish Citizen (W)		Jacksonville
Labor Journal (W)		Jacksonville
Legal News (W)		Jacksonville
Ocean Beach Reporter (W)		Jax Beach
Southeast Drug Journal (Mo)		Jacksonville
Southeast Insurance Journal (Mo)		Jacksonville
United States Ports (Mo)		Jacksonville

ESCAMBIA

Pensacola Citizen (W) (col)		Pensacola
Pensacola Herald (W)		Pensacola
Pensacola Journal (M)	14,399	Pensacola
Pensacola News (E)	10,876	Pensacola
Progressive Worker (W) (col)		Pensacola
Public Record (W)	2,700	Pensacola

FLAGLER

Flagler Tribune (W)	929	Bunnell
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FRANKLIN

Apalachicola Times (W)		Apalachicola
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GADSDEN

Gadsden County Times (W)	1,854	Quincy
River Junction Tribune (W)		Chattahoochee

GILCHRIST

Gilchrist County Journal (W)		Trenton
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GLADES

Glades County Democrat (W)

Moore Haven

GULF

Gulf County Breeze (W)

Wewahitchka

Port St. Joe Sentinel (W)

Port St. Joe

Port St. Joe Star (W)

Port St. Joe

HAMILTON

Jasper News (W)

Jasper

HARDEE

Bowling Green Exponent (W)

Bowling Green

Florida Advocate (W)

Wauchula

Hardee County Herald (W)

Wauchula

HENDRY

Clewiston News (W)

Clewiston

Hendry County News (W)

LaBelle

HERNANDO

Brooksville Journal (W)

Brooksville

Brooksville Sun

Brooksville

HIGHLANDS

Avon Park Times (W)

950 Avon Park

Highlands County News (W)

Sebring

Scenic Highlands Sun

Avon Park

Sebring American (E)

2,307 Sebring

HILLSBOROUGH

What's What in Clearwater (Mo)		Clearwater
Dental Bulletin (Mo)		Tampa
Citrus Industry (M)		Tampa
The Commuter (W)		Tampa
Florida Labor Advocate (W)		Tampa
Internacionalo (W)		Tampa
Evening News (S-W)		Tampa
Florida Grower (Mo)		Tampa
La Gaceta (E)		Tampa
La Traduccion (M)		Tampa
The Minaret (BMo)	600	Tampa
Plant City Enterprise (W)	1,332	Plant City
Sun Dial (Mo)		Tampa
Tampa Bulletin (W) (col)		Tampa
Tampa Daily Times (E)	26,959	Tampa
Triunfo (W)		Tampa
Tampa Morning Tribune (M)	51,948	Tampa
Tampa Free Press (W)		Tampa
Plant City Courier (SW)		Plant City
Italian Press (W)		Tampa
Florida News Service (W)		Tampa
El Heraldo Dominical (W)		Tampa
Citrus Exchange News (Mo)		Tampa
Florida Coast-to-Coast Magazine (Mo)		Tampa

HOLMES

Holmes County Advertiser (W)	1,000	Bonifay
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INDIAN RIVER

Vero Beach Press Journal (W)	1,800	Vero Beach
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JACKSON

Graceville News (W)		Graceville
Jackson County Floridian (W)	2,915	Marianna
The Yellow Jacket		Marianna

JEFFERSON

Monticello News (W)		Monticello
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LAFAYETTE

Mayo Free Press (W)	400	Mayo
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LAKE

Clermont Press (W)	800	Clermont
Eustis Lake Region (W)	1,650	Eustis
Florida Newspaper News (Mo)		Clermont
Florida Poultryman (Mo)		Clermont
Groveland Graphic (W)		Groveland
Lake County Citizen (W)	1,400	Tavares
Leesburg Commercial (W)	1,510	Leesburg
Leesburg Ledger (W)		Leesburg
Mt. Dora Topic (W)		Mt. Dora
Umatilla Tribune (W)	360	Umatilla

LEE

American Eagle (W)		Estero
Southwest Floridian (W)	2,476	Ft. Myers
Ft. Myers News Press (M)	5,108	Ft. Myers

LEON

Famcee Collogian (col)		Tallahassee
The Flambeau (W)		Tallahassee
Florida State News (M)	5,472	Tallahassee
Tallahassee Democrat (E)	5,654	Tallahassee
Florida Educational Assn. (Mo)		Tallahassee

LEVY

Levy County Journal (W)		Bronson
Williston Sun (W)		Williston

LIBERTY

Bristol Free Press (W)		Bristol
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MADISON

Madison Enterprise Recorder (W)	1,000	Madison
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MANATEE

Bradenton Herald (E)	3,264	Bradenton
The Commonwealth (Mo)		Bradenton
Manatee County Advertiser (Mo)		Bradenton
Palmetto News (W)		Manatee

MARION

Dunellon Sun (W)		Dunellon
North Marion News (W)	300	McIntosh
Marion County News (W)		Ocala
Ocala Banner (M)	3,523	Ocala
Ocala Star (E)	3,668	Ocala

MARTIN

Stuart News (E)	1,285	Stuart
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MONROE

Key West Citizen (M)		Key West
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NASSAU

Callahan News (W)	1,115	Callahan
Fernandina News (W)		Fernandina
Fish and Oyster Reporter (Mo)		Fernandina
Nassau County Leader (W)	900	Fernandina

OKALOOSA

Okaloosa Messenger (W)	1,550	Crestview
Okaloosa News Journal (W)	2,300	Crestview

KEECHOBEE

Okeechobee News (W)		Okeechobee
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ORANGE

Central Florida Times (W)		Orlando
Florida Business Woman (Mo)		Orlando
Florida Club Woman (Mo)		Orlando
Florida Products Journal (Mo)		Orlando
Florida Realty Journal (Mo)		Orlando
The Orlandean (W)		Orlando
Orange County Chief (W)	1,570	Apopka
Orlando Reporter Star (E)	9,195	Orlando
Orlando Sentinel (M)	11,356	Orlando
Orlando Shopping News (W)		Orlando
Orlando Sun (W) (col)		Orlando
Rollins Sandspur (W)	525	Winter Park
West Orange News (W)	1,366	Winter Garden
Winter Park Herald (W)		Winter Park

OSCEOLA

Florida Cattleman (Mo)		Kissimmee
Kissimmee Gazette (W)		Kissimmee
St. Cloud News (W)		St. Cloud
St. Cloud Tribune (W)		St. Cloud

PALM BEACH

Belle Glade News (W)		Belle Glade
Delray Beach News (W)	600	Delray Beach
East Coast News (W) (col)		West Palm Beach
Everglades News (W)		Canal Point
Lake Worth Herald (W)		Lake Worth
Lake Worth Leader (E)		Lake Worth
Pahokee News (W)	500	Pahokee
Palm Beach Daily News (M)		Palm Beach
Palm Beach Post (M)	7,798	Palm Beach
Palm Beach Sun (W)		West Palm Beach
Palm Beach Times (W)	10,700	Palm Beach
Union Labor News (W)		West Palm Beach

PASCO

New Port Richey Press (W)		New Port Richey
Pasco County Free Press (W)	250	Dade City
Zephyrhills News (W)	1,200	Zephyrhills
Dade City Banner (W)	1,800	Dade City

PINELLAS

St. Petersburg Times (M)	19,578	St. Petersburg
St. Petersburg Independent (E)		
	15,529	St. Petersburg
The Record (W)		St. Petersburg
St. Petersburg Advocate (W)		St. Petersburg
Safety Harbor Herald (W)	550	Safety Harbor
Clearwater News (W)	740	Clearwater
Clearwater Sun (E)	3,496	Clearwater
Dunedin Times (W)		Dunedin
Gulf Beach News (W)		Pass-a-Grille
Gulfport Tribune (W)		St. Petersburg
Home Echoes (Mo)		St. Petersburg
Public Informer (W) (col)	2,150	St. Petersburg

PINELLAS (Cont.)

Largo Sentinel (W)		Largo
Sunshine City News (W)		St. Petersburg
Tarpon Springs Leader (W)	1,280	Tarpon Springs
Tarpon Springs News (W)	500	Tarpon Springs

POLK

Auburndale Journal (W)		Auburndale
Polk County Democrat (W)		Bartow
Polk County Record (E)	1,431	Bartow
Ft. Meade Leader (W)	1,685	Ft. Meade
Highland News (W)		Frostproof
Haines City Herald (W)		Haines City
Lake Wales News (W)	1,700	Lake Wales
Lake Wales Daily (E)	1,200	Lake Wales
The Highlander (W)	2,000	Lake Wales
Lakeland News (W)	3,206	Lakeland
Lakeland Ledger (E)	7,188	Lakeland
Florida Law Journal (Mo)	1,430	Lakeland
Florida Christian Advocate (W)	5,800	Lakeland
Mulberry Press (W)	2,436	Mulberry
Winter Haven Herald (W)	1,320	Winter Haven
Winter Haven Chief (E)	4,773	Winter Haven

PUTNAM

Palatka Times Herald (W)	2,450	Palatka
Palatka Daily News (E)	5,151	Palatka

ST. JOHNS

Dispatch (Railway Employees) (Mo)	12,000	St. Augustine
St. Augustine Observer (W)		St. Augustine
St. Augustine Post (W) (col)		St. Augustine
St. Augustine Record (E)	3,819	St. Augustine



ST. LUCIE

Ft. Pierce News Tribune (E)	2,713	Ft. Pierce
Ft. Pierce Weekly Star (W)	410	Ft. Pierce

SANTA ROSA

Milton Gazette (W)	1,860	Milton
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SARASOTA

Sarasota Herald-Tribune (E)	2,700	Sarasota
Sarasota News Advertiser (W)		Sarasota
Venice Nokomis News (W)		Venice

SEMINOLE

Sanford Herald (E)	1,952	Sanford
Seminole County Sentinel (W)		Sanford

SUMTER

Sumter County Times (W)		Bushnell
Wildwood Echo (W)		Wildwood

SUWANNEE

Present Truth Messenger (W)	2,760	Live Oak
Suwannee Democrat (W)	1,846	Live Oak

TAYLOR

Taylor County News		Perry
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UNION

Union County Times (W)	500	Lake Butler
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VOLUSIA

Daytona Beach Independent (W)	2,000	Daytona Beach
Daytona Beach Observer (W)		Daytona Beach
Daytona Beach Evening News (E)	7,147	Daytona Beach
Daytona Beach Morning Journal (M)		
	5,054	Daytona Beach
Daytona Beach Sun Record (M)	5,025	Daytona Beach
Deland Sun News (E)	3,196	Deland
Florida Fireman (Mo)		New Smyrna
New Smyrna News (E)	1,753	New Smyrna
Volusia County Democrat (W)	2,250	Deland
The Magazine of Travel (nl)		Deland

WAKULLA

Wakulla County News (W)		Crawfordville
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WALTON

DeFuniak Springs Breeze (W)	1,150	DeFuniak Springs
DeFuniak Springs Herald (W)		DeFuniak Springs

WASHINGTON

Chipley Banner (W)	1,750	Chipley
Washington County News (W)		Chipley

## A-B-C's OF PREPARING NEWSPAPER COPY

BEFORE YOU WRITE A SINGLE LINE pay a personal visit to your editor. Become acquainted with him. Explain the purpose of your publicity campaign. Find out what he will and will not take. Ask about deadlines. He'll appreciate your call -- if you don't hang around too long!

If newspapers should, as they will at some time or other, MAKE AN ERROR IN YOUR STORY THAT IS SO SERIOUS you feel you must call their attention to it, be sure you approach them in a friendly spirit. You'll stand a far better chance of getting a correction or a second story. For remember: There's no law requiring them to print your publicity. And if you make an unpleasant scene in demanding a correction you may be sure your future stories won't receive a very cordial reception.

DON'T BE HYPER-CRITICAL OF SMALL MISTAKES

and don't become discouraged over them. When a large amount of publicity is going out, mistakes are bound to happen. They happen to everyone, not just you alone. And the benefits derived from consistent representation in the newspaper outweigh by far the few mistakes that occur.

TIME AND DEAD LINES WAIT FOR NO MAN. IF

possible, get your copy to the PAPER AT LEAST 24 HOURS before the deadline of the edition you want to make. In the case of Sunday editions allow at least 3 days leeway, and 5 days if you can possibly manage it, since even the smaller papers start setting up their Sunday editions by the middle of the week.

ALWAYS RE-TYPE STORIES LIFTED FROM PRINTED

PUBLICITY KITS AND INSERT LOCAL NAMES. Even if you don't localize, at least re-type. Editors have a natural born hatred of canned copy.

150 Appendix F

TYPE IN DOUBLE SPACE ON ONE SIDE ONLY, using strong paper, not flimsy onion skin second sheets. (See sample manuscript)

NUMBER EACH PAGE CONSECUTIVELY if more than one page is necessary to tell the story. Print the word (MORE) at the bottom of page when another page follows.

PUT THE END MARK ##### of -30- at the close of every complete story.

IDENTIFY EACH PAGE OF THE STORY by tagging it at the extreme upper left hand corner with a few explanatory words.

DO NOT STAPLE PAGES TOGETHER. The identification tag line will be sufficient to locate the story in case the pages become separated in the newspaper office.

PUT YOUR NAME, ADDRESS AND PHONE NUMBER at extreme upper right hand side of first page in case the editor wishes to contact you regarding the story.



PUT EXACT RELEASE DATE AND TO WHOM RELEASED at top of page something like this: RELEASE MONDAY MARCH 2 1939 TO MORNING PAPERS (in the case of releases to groups of papers or syndicate services such as the Associated Press). Or this way: RELEASE MONDAY MARCH 2 1939 TO CENTERVILLE GAZETTE AND RICEVILLE STANDARD when a story is going to only two papers and both are in the same circulation area. Never deceive a paper into thinking it has an exclusive story in its area by not letting it be known that the opposition paper has it. Naturally the better plan is to give it to only one paper in that area. But if it is so important that both papers should have it, re-write it from a new angle for the second paper.

DON'T GIVE THE "BREAKS" (FIRST STORIES) to the same paper ALL the time. Alternate with opposition papers if you want to live longer and get farther!

DROP HALF WAY DOWN THE FIRST PAGE to begin the body of your story. Allow wide margins on both sides. This leaves space for the editor to write his headline, sub-heads and instructions to the composing room.

KEEP CARBON COPIES OF ALL RELEASES in your files and never loan them.

SECURE SURNAME OR INITIALS for all proper names. It is essential that the reader know which Mr. Smith it is and which Miss Jones. Newspaper editors have been known to toss stories into the wastebasket for failure to conform to this elementary rule of journalism.

DO NOT EDITORIALIZE. Meaning do not voice personal opinions unless you quote someone. And if you quote be sure you have the person's permission and that he knows what it is you're saying he says!

UNDERLINE ALL UNUSUALLY SPELLED WORDS and names to indicate they are correct.

DON'T USE UNFAMILIAR WORDS if you can substitute a familiar one. State the fact simply. YOU may be an expert on the subject you're writing about, and its technical terms may be perfectly clear to you. But they may be Greek to the general public and you cannot expect readers to put down the paper and hunt a dictionary. It is too easy to turn from YOUR story to one that doesn't try to "educate."

REMEMBER THAT THE LENGTH OF PARAGRAPHS in newspapers does not normally exceed 100 words, and generally ranges from 25 to 70 words.

AVOID USING THE PHRASE "LAY PUBLIC" or "lay people." It sounds as if you were on a pedestal looking down at your readers.

AVOID ALSO "INCIDENCE OF DISEASE." State the number of cases, percentage, rate or use some other way of describing the severity. And don't call a malaria mosquito an "anophelos" or infantile paralysis "poliomyelitis" in a newspa-

per. In other words write in words of one syllable.

A NEWSPAPER STORY IS AN INVERTED SHORT STORY. By this is meant, that the climax is told first.

THE FIRST PARAGRAPH OF A NEWSPAPER STORY IS CALLED THE lead. It should tell WHO, WHAT, WHEN WHERE, WHY. The facts that follow should be pyramided downward in the order of their importance so that if, when the paper goes to press, it is necessary to shorten the story the make-up man can lift out the last paragraph or paragraphs without losing the substance of the story.

IN USING MATS (MATRICES) instead of cuts to illustrate a story be sure they are not defaced by any sharp instrument or allowed to come in contact with water. Either will make them impossible to use.

Last, remember that----

NEWS IS ONLY NEWS ONCE AND THAT'S WHEN IT IS NEW

and

NO STORY IS OF ANY VALUE AT ALL UNLESS IT IS AB-  
SOLUTELY ACCURATE.



ANTI-HOOKWORM CAMPAIGN

RELEASE MONDAY MORNING MARCH 6 1939

From - John Doe

000 State St.

(or P.O.B.)

Riceville

Phone 2-2654

(Sample Copy)

Actual size of sheet should be  
8x11 or other standard  
paper

"Seventy percent of the rural white population in Blank County is suffering with hookworm disease," according to Dr. Lauren Graessle, director of the Blank County Health Unit, and George Jones, Florida State Board of Health sanitary engineer. This fact was made public yesterday at a meeting of the Blank Civic Club by the public health officials to substantiate their statement that hookworm disease is one of Florida's major public health problems.

et cetera

OFFICERS AND BOARD\*  
of  
STATE-WIDE PUBLIC HEALTH COMMITTEE

John P. Ingle, Sr., State President  
(General Manager, Associated Industries of Florida)  
Jacksonville

Mrs. Malcolm McClellan, Vice President  
(President Florida Congress of Parents & Teachers)  
Jacksonville

Miss Jean Henderson, Executive Secretary  
Jacksonville

-----

W. C. Brooker, State Commander  
American Legion  
Tampa

D. H. Redfearn, President  
Florida Bar Association  
Miami

E. B. Penn, D. D. S., President  
Florida State Dental Society  
Miami

I. W. Shields, D. D. S., President-elect  
Florida State Dental Society  
Miami

Miss Verdie Selman, President  
Florida Federation of Business and Professional  
Women's Clubs - Jacksonville

158 Appendix G

Mrs. Willis M. Ball,  
Jacksonville

Carl D. Brorein, President  
Florida State Chamber of Commerce  
Tampa

Mrs. John G. Kellum  
Tallahassee

Leigh F. Robinson, M. D., President  
Florida Medical Association  
Ft. Lauderdale

John S. Turberville, M. D., President-elect  
Florida Medical Association, Century

George C. Willings,  
Pensacola

Mrs. J. Ralston Wells, President  
Florida Federation of Women's Clubs  
Daytona Beach

Mrs. Thurston Roberts, 1st Vice-President  
Florida Federation of Women's Clubs  
Jacksonville

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Orlando

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Duval County Medical Society  
Jacksonville

S. R. Norris, M. D., President-elect  
Duval County Medical Society  
Jacksonville

Mrs. Martha Stetson, President  
Florida State Nurses' Association  
St. Petersburg

Charles E. Silva, President  
Florida Federation of Labor  
Tampa

CHAIRMEN & CO-CHAIRMEN

by

DISTRICTS & COUNTIES

DISTRICT 1

Chairman

Co-chairman

Marion T. Gaines  
Pensacola

Mrs. H. E. Norton  
Pensacola

-----  
Bay County

Mrs. J. A. Seale  
Panama City

Thorne Lane  
Panama City

Escambia County

Marion T. Gaines  
Pensacola

John C. Briggs  
Pensacola

Holmes County

L. H. Paul, M. D.  
Bonifay

Mrs. Brooks Padgett  
Bonifay

Okaloosa County

N. C. Brackin  
Crestview

Mrs. Bess Outlaw  
Crestview

Santa Rosa County

P. M. Caro  
Milton

Mrs. Zena Elder  
Milton



Chairman

Co-chairman

Walton County

A. Graham Campbell, Jr.,  
DeFuniak Springs

Mrs. W. E. Bryant  
DeFuniak Springs

Washington County

W. B. Northcutt  
Chipley

Mrs. O. G. Shivers  
Chipley

DISTRICT 2

F. A. Rhodes  
Tallahassee

Mrs. F. Clifton Moor  
Tallahassee

Calhoun County

John Jones  
Blountstown

(Pending)

Franklin County

Stanley Sheip  
Apalachicola

Joe Buzzett  
Apalachicola

Gadsden County

Rev. R. C. Holmes  
Quincy

Mrs. Meade Love,  
Quincy

Gulf County

Mrs. Robert Tapper  
Port St. Joe

Byrd E. Parker  
Wewahitchka

Chairman

Co-chairman

Jackson County

C. Davis Turner  
Marianna

(Pending)

Jefferson County

W. M. Scruggs  
Monticello

Judge S. D. Clarke  
Monticello

Leon County

Edward R. Annis, M. D.  
Tallahassee

Mrs. B. A. Wilkinson  
Tallahassee

Liberty County

Sam Fairchild  
Bristol

Fred M. Grant  
Bristol

Madison County

Frank Lloyd  
Madison

D. G. Ashley  
Madison

Taylor County

J. H. Kansinger  
Perry

Mrs. Louise Butler  
Perry

Wakulla County

Walter S. Revell  
Crawfordville

(Pending)

DISTRICT 3

Chairman

Clifford A. Payne  
Jacksonville

Co-chairman

Mrs. Camille S. L'Engle  
Jacksonville

Alachua County

Dean Walter J. Matherly  
Gainesville

Mrs. J. W. McCollum  
Gainesville

Baker County

B. R. Burnsed  
Macclenny

Mrs. S. Fogelberg  
Glen St. Mary

Bradford County

(Chairman resigned,  
successor pending)

(Pending)

Clay County

Mrs. E. VanWagenen  
Green Cove Springs

(Pending)

Columbia County

R. B. Harkness, M. D.  
Lake City

Mrs. J. R. Tomlinson  
Lake City

Dixie County

Mrs. J. C. Redding  
Shamrock

Mrs. Jack Elgin  
Shamrock

Chairman

Co-chairman

Duval County

Joseph M. Erskine  
Jacksonville

Mrs. G. Emmett Batey  
Jacksonville

Flagler County

J. B. High  
Bunnell

Mrs. O. F. Alford  
Bunnell

Gilchrist County

A. F. Driskell  
Trenton

Mrs. Earl Miller  
Trenton

Hamilton County

Harry T. Reid  
Jasper

Barney Howard  
Jasper

Lafayette County

Mrs. Lewis Lamb  
Mayo

Guy McLain  
Mayo

Levy County

Mrs. Emma Rutland  
Williston

Mrs. T. J. Stokes  
Bronson

Nassau County

W. J. Deegan, Jr.  
Fernandina

Rev. Wm. F. Dunkle, Jr.  
Fernandina

Chairman

Co-chairman

Putnam County

Rev. E. Watkins Tayloe  
Palatka

Mrs. W. M. Dunson  
Welaka

St. Johns County

Judge Charles Mathis  
St. Augustine

Miss Anna Heist  
St. Augustine

Suwannee County

Mrs. B. W. Helvenston, Sr.  
Live Oak

(Pending)

Union County

John E. Haines, M. D.  
Lake Butler

Mrs. T. M. Rihard  
Lake Butler

DISTRICT 4

Edward M. Newald  
Orlando

Mrs. C. R. Whitaker  
Eustis

Brevard County

Dr. G. Thomsen von Colditz  
Cocoa

(Pending)

Lake County

George L. Singletary  
Leesburg

(Pending)



Chairman

Co-chairman

Marion County

Mrs. Curtis Gombar (Acting)	(Pending)
Ocala	

Orange County

W. R. Woods	(Pending)
Orlando	

Osceola County

Dr. W. G. Hankins	(Pending)
Kissimee	

Seminole County

W. A. Leffler	Mrs. W. L. Morgan
Sanford	Sanford

Sumter County

Broward Miller	Mrs. Emma Wilkerson
Bushnell	Coleman

Volusia County

Mrs. B. B. Baggett	Mrs. Chester C. Strawn
Daytona Beach	Deland

DISTRICT 5

O. W. King	Mrs. J. Austin Williams
Tampa	St. Petersburg

ChairmanCo-chairmanCitrus County

W. B. Moon, M. D.  
Crystal River

(Pending)

Hernando County

Rev. D. Y. Page  
Brooksville

Mrs. W. B. Gittings  
Brooksville

Hillsboro County

Mrs. J. Reid Ramsey  
Lutz

(Pending)

Manatee County

E. C. Rice  
Bradenton

Mrs. W. E. Wiggins  
Manatee

Pasco County

J. H. Price  
Zephyrhills

Mrs. May Potter  
New Port Richey

Pinellas County

Allan C. Grazier  
St. Petersburg

Mrs. George Warren  
Clearwater

Polk County

J. Allen Barnett  
Lakeland

Mrs. Mary Sand  
Bartow

DISTRICT 6

Chairman

Co-chairman

P. G. LeMoynes, (Acting)  
Fort Myers

(Pending)

Charlotte County

Earl Farr  
Punta Gorda

Mrs. Esther Jordan  
Punta Gorda

Collier County

Mrs. Tommie C. Barfield  
Collier City

(Pending)

De Soto County

Harold Smith  
Arcadia

Miss Effie Stanford  
Arcadia

Glades County

Committee organized,  
Chairman not yet appointed.

Hardee County

F. G. James, Jr.,  
Wauchula

Mrs. Dennis Sellers  
Wauchula

Hendry County

Mrs. J. A. McGehee  
Clewiston

H. C. Kolsted  
Clewiston

Chairman

Co-chairman

Highlands County

Rev. Richard I. Brown  
Sebring

(Pending)

Lee County

Lester H. Baker  
Fort Myers

Mrs. Clarence Zimmerman  
Fort Myers

Sarasota County

Mrs. Howard Dial  
Sarasota

Mrs. Harry Gocio  
Sarasota

DISTRICT 7

A. J. Cleary  
Miami

Mrs. J. A. Austin  
Miami

Broward County

Frank Stirling  
Davie

(Pending)

Dade County

Mrs. Leonard W. Haskin  
Miami

(Pending)

Indian River County

Mrs. W. F. Cox  
Vero Beach

(Pending)

Chairman

Co-chairman

Martin County

L. C. Clements  
Stuart

Mrs. Ralph Hartman  
Stuart

Monroe County

Mrs. Hugh Williams  
Key West

Izadore Lewis Weintraub  
Key West

Okeechobee County

S. R. Raifsnider  
Okeechobee

Mrs. Van Berkum  
Okeechobee

Palm Beach County

Mrs. T. P. Riggs  
West Palm Beach

(Pending)

St. Lucie County

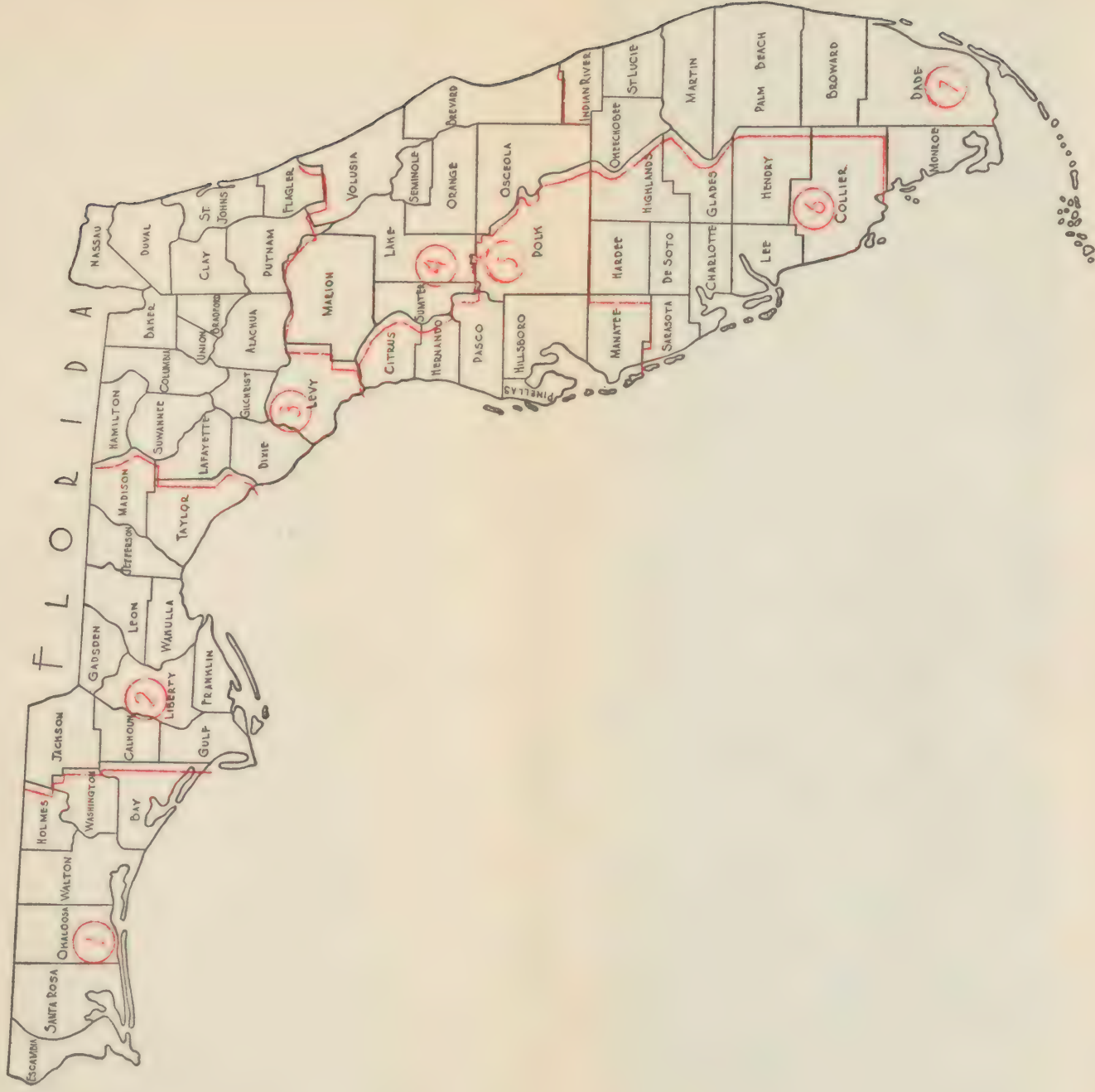
Dewey Crawford  
Fort Pierce

(Pending)



# Districts of the

## STATE - WIDE PUBLIC HEALTH COMMITTEE



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